Who should nominate?
Employers, supervisors, vocational counselors, job developers, job coaches, stakeholders, family members and advocates, anyone interested in developing more employment opportunities for workers with disabilities may nominate.

Who should be nominated?
- Employers who create a welcoming and inclusive workplace for employees with disabilities
- Employers who use best practices and create an adaptive work environment
- Employers who sponsor programs and activities promoting employment preparation and job skill training for youth with disabilities
- Individuals who provide long-term supports and services to workers with intellectual, developmental and/or psychological disabilities
- Individuals with disabilities who make a tangible difference in empowering individuals with disabilities in Washington State

Why nominate?
Each year the Governor’s Committee on Disability Issues and Employment hosts the Governor’s Employer Awards Program. This event has two main goals: to recognize the excellent work being done to improve employment opportunities for workers with disabilities and to acknowledge individuals who make positive outcomes enhancing the empowerment of individuals with disabilities. Reasons to nominate employers and individuals include:
- To shine a spotlight on organizations and individuals who make a difference in their communities
- To showcase achievements and share best practices
- To acknowledge employers who successfully create inclusive workplaces and see significant results
- To acknowledge and reward their effort, creativity and sensitivity
- To recognize the excellent work being done by individuals with disabilities positively impacting the disability community

What’s new this year?
- A one-week extension has been added (September 3rd) to submit photos, releases & support letters through email to GCDEawards@esd.wa.gov.
- The definition of the Direct Support Professional has been updated, providing additional information on who qualifies for the award.
- Each award nomination is rated with 100 points. The number of points assigned to each question is shown on the nomination form.
What’s the timeline?
The deadline to submit a nomination package is **August 27th, 2019**. Support materials such as letters of recommendation, newspaper articles, signed release forms and photos can be submitted by email until **September 3rd, 2019**. All nominees will receive recognition in an awards ceremony in the Fall 2019.

What are the awards categories?
- **Public, Private, and Non-Profit Employers**
  Honors employers for their efforts to recruit, hire and promote individuals with disabilities.
- **Youth Employer**
  Honors employers who support youth with disabilities through employment preparation and job skills training.
- **Direct Support Professional**
  Recognizes an outstanding professional who provides long-term support and services to individuals with intellectual, developmental and/or psychological disabilities.
- **Governor’s Trophy in Memory of Carolyn Blair Brown**
  Honors an individual with a disability who has developed or influenced programs, services, legislation, etc. resulting in positive outcomes enhancing the empowerment of individuals with disabilities in Washington State.

What’s in this Nomination Packet?

Nomination Instructions & Process: including the general requirements, tips for award winning nominations, the nomination and submittal process and the selection process  
Page 3

Award Nomination Templates: including basic nomination information as well as the questions to be answered. The templates mirror the information found in the electronic nomination form  
Page 5

Letter to Employer Advising of Proposed Nomination and Requesting Assistance  
Page 16

Employer “Congratulations!” Form Letter  
Page 17

The Publication, video and web site consent & release agreement – to be signed by nominees/persons in photos  
Page 18

Photos of the 2018 Award Recipients  
Page 19

About the GCDE: The Governor's Committee on Disability Issues and Employment administers the Governor's Employer Awards Program and other activities. It provides statewide advocacy and leadership to empower the disability community to obtain equality of opportunity and maximum independence.

To request an **application in alternate formats**, please contact Emily Heike, via phone: 360.902.9440 or email: GCDEawards@esd.wa.gov. If you require assistance filling out the nomination packet, please contact staff at 360.902.9440. They are happy to assist you.
Nomination Instructions & Process

General Requirements

- Individuals, businesses, or organizations may submit nominations for themselves or others.
- Current GCDE members and staff cannot themselves be nominees or have nominations submitted during the same time they serve the Committee.
- Employers considered for these awards must employ workers with disabilities who are paid with the Washington State minimum wage of $12.00 per hour or higher and eligible to receive employee benefits as other similarly situated employees.
- Previous award winners may not receive an award for the same body of work.
- Nominators are responsible for submitting accurate and complete information. Nominations should include specific detailed information about the nominee. A response to each question is required, with “Not Applicable” being an option.
- When submitting a nomination, the nominee must authorize and approve the use of their name, nomination content, expressions and likeness in marketing, public relations and outreach efforts associated with the Awards program. Nominators must submit two photos and release forms signed by the nominee and all individuals in the photos (see page 18) permitting us to use the photos in our program and marketing materials. These materials can be uploaded to Survey Monkey, mailed with your nomination packet, or emailed to GCDEawards@esd.wa.gov. Nominations will not be considered complete until photos, releases and support letters are received. The deadline for all support materials to be submitted is September 3rd, 2019.
- Please do not disclose confidential or personal information about the nominees, especially details about medical conditions that must remain private in compliance with regulations (e.g., the Health Insurance Portability and Accountability Act - HIPAA).
- Note: videos will not be accepted as part of the nomination materials.

Tips for Award Winning Nominations

Tip #1
- Read nomination question carefully
- Write complete responses; provide details with 2-3 examples

Tip #2
- Ask the nominee to suggest information to include
- Ask others who know the nominee to suggest information

Tip #3
- Describe how the nominee's contribution/work is unique
- Describe how the nominee went above and beyond to create a positive, inclusive work environment/community

Tip #4
- If at first you don’t succeed…resubmit!
- Update the nomination with recent accomplishments
Nomination & Submittal Process

As shown in the graphic below, with the nomination process starting on 6/05/2019, those wishing to nominate an individual or an employer should advise the nominee and fill out the nomination form. The nominee must review the information and complete the release forms. The nominator gathers the information including the supporting documents and two photos. The nomination materials must be submitted to the Governor’s Employer Awards Program by 8/27/2019. A selection committee will review the nomination materials and select the award recipients. The Award Ceremony is targeted for the Fall 2019.

Please remember the following information:

- The nomination deadline is August 27th. Support materials are due September 3rd, 2019.
- Electronic nominations are preferred and should be submitted through Survey Monkey (full URL: https://www.surveymonkey.com/r/JQPMW5T). This packet is a helpful companion to the Survey Monkey.

- Faster Results - Consider jotting down your notes for each question before you start the online Survey Monkey

- Mailed nominations must be typed or printed legibly. The mailing address is:
  GCDE - Governor’s Employer Awards Program
  P.O. Box 9046 Olympia, WA 98507-9046

- If you have questions, need assistance or help in filling out the nomination packet or with using the Survey Monkey, please contact Emily Heike via phone: 360.902.9440 or email: GCDEawards@esd.wa.gov.
- A confirmation email will be sent to you when your nomination has been accepted.

Selection Process

- A distinguished panel of professionals consisting of Governor's Committee Members, previous award winners and business representatives will select award recipients.
- Members of the Selection Committee will individually score and evaluate each nomination based on how well the packet addresses the questions for the specific award category.
Judging is conducted solely on the information provided in the nomination packet.
In any given year, an award will not be bestowed in a category if the submissions are found insufficient.
GCDE reserves the right to present more than one award per category.

### Award Nomination Templates

- Governor’s Employer Awards for Private and Non-Profit Employers  
  Page: 6

- Governor’s Employer Awards for Public Employers  
  Page: 8

- Governor’s Youth Employer Award  
  Page: 10

- Direct Support Professional Award  
  Page: 12

- Governor’s Trophy *in Memory of Carolyn Blair Brown*  
  Page: 14
Governor’s Employer Awards for Private and Non-Profit Employers

Private and Non-Profit Employers are recognized for their efforts to recruit, hire and promote individuals with disabilities.

- **Private Employers** generate revenues from the services and products they provide.
- **Non-Profit Employers** are registered with the state and maintain 501(c)(3) certification.

**NOTE:** All employers considered for these awards must pay workers with disabilities the Washington State minimum wage of **$12.00** per hour or higher and provide employee benefits as other similarly situated employees.

### Nomination

**Business Name:** ________________________________________________________________

**Business Address:** ______________________________________________________________

**Contact Person’s Name:** _________________________________________________________

**Contact Person’s Phone:** _______________________ **Email:** ____________________________

**Type:**
- ☐ Private
- ☐ Non-Profit

**Size:**
- ☐ Small (25 or less employees)
- ☐ Medium (26-249 employees)
- ☐ Large (250 or more employees)

**Total Number of Staff:** __________  **# of Staff with Disabilities:** __________

**Nominated by:** ______________________________ **Phone Number:** ______________________

**Business Name:** _____________________________ **Nominator Address:** ______________________

**Nominator Email:** ______________________________________________________________

**Questions:** Please include as many specific examples as possible to help demonstrate why this employer deserves to receive this award. All questions must be answered for a nomination to be complete with N/A an acceptable response. We understand there may be overlap in the responses provided below. All six questions total 100 points. As shown below, each question has a maximum number of points. The Selection Committee members rate each response and the support materials submitted. (Please note: the online Survey Monkey numbers the questions differently.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Max Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describe the organization’s most successful practices to recruit people with disabilities.</td>
<td>15</td>
</tr>
<tr>
<td>2. Describe the nominee's practices to retain and advance individuals with disabilities in their workforce and in their management teams, such as regular pay increases, additional work hours, increased work responsibilities and promotional opportunities.</td>
<td>20</td>
</tr>
</tbody>
</table>
3. Describe the organization's practices to involve employees with disabilities in the informal/social aspects of workplace culture, fostering natural supports and creating an inclusive environment.  

Max Points: 15

4. Describe the nominee's efforts and practices to make workplace accommodations for employees with disabilities. Some examples include acquisition of adaptive technology or equipment, facility modifications, job sharing, providing alternate or extra supervision, special training and collaboration with job coaches or service organizations.  

Max Points: 20

5. Feel free to add information about other programs, procedures, processes, practices, attitudes or other information about the employer you feel is relevant to your nomination for the Governor's Employer Award.  

Max Points: 15

6. A completed nomination must include a minimum of two support documents, i.e., support letters, letters of recommendation, or news articles, only from colleagues, employers, customers, co-workers, friends and family members. Support letters from nominators will not be accepted. Support documents can be uploaded with the electronic nomination, sent along with a typed nomination or forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019. Note: videos will not be accepted as part of the nomination packet.  

Max Points: 15

A completed nomination must include two photos and signed release forms found on page 18. Please include in the file name the business name and the last name of the individual(s). The photos and signed release forms can be uploaded with the electronic nomination; can be sent along with the typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.

**Award Ceremony PowerPoint Presentation**

During the Award Ceremony, each nominee is introduced with a PowerPoint slide and asked to come forward to receive a certificate. Please recommend the wording to be used on the slide describing the nominee’s efforts being recognized.

By submitting this nomination, I attest the information I am providing is accurate and complete. I have obtained the necessary permission and releases for the information and photos being submitted. I also understand the information I am providing may be used for local, state or national publicity.

Nominator’s Signature ___________________________ Date ____________

The Nomination Deadline is August 27, 2019

Electronic nominations should be submitted to Survey Monkey (full URL: https://www.surveymonkey.com/r/JQPMW5T)
Governor’s Employer Award for Public Employers

Public Employers are recognized for their efforts to recruit, hire and promote individuals with disabilities.

- **Public Employers** are governmental entities (Federal, State, City, County, Municipalities) whose revenues are derived from public support, i.e., taxes.

**NOTE:** All employers considered for these awards must pay workers with disabilities the Washington State minimum wage of **$12.00** per hour or higher and provide employee benefits as other similarly situated employees.

**Nomination**

Business Name: ______________________________________________________________

Business Address: ______________________________________________________________

Contact Person’s Name: _________________________________________________________

Contact Person’s Phone: _______________________ Email: ____________________________

Type (Federal, State, City, County, Municipalities): ________________________________

Total Number of Staff: __________ # of Staff with Disabilities: __________

Nominated by: _________________________ Phone Number: __________________________

Business Name: _______________________ Nominator Address: _______________________

Nominator Email: __________________________________________________________________

**Questions:** Please include as many specific examples as possible to help demonstrate why this employer deserves to receive this award. All questions must be answered for a nomination to be complete with N/A an acceptable response. We understand there may be overlap in the responses provided below. All six questions total 100 points. As shown below, each question has a maximum number of points. The Selection Committee members rate each response and the support materials submitted. (Please note: the online Survey Monkey numbers the questions differently.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Max Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describe the organization’s most successful practices to recruit people with disabilities.</td>
<td>15</td>
</tr>
<tr>
<td>2. Describe the nominee’s practices to retain and advance individuals with disabilities in their workforce and in their management teams, such as regular pay increases, additional work hours, increased work responsibilities and promotional opportunities.</td>
<td>20</td>
</tr>
</tbody>
</table>
3. Describe the organization’s practices to involve employees with disabilities in the informal/social aspects of workplace culture, fostering natural supports and creating an inclusive environment.

4. Describe the nominee’s efforts and practices to make workplace accommodations for employees with disabilities. Some examples include acquisition of adaptive technology or equipment, facility modifications, job sharing, providing alternate or extra supervision, special training and collaboration with job coaches or service organizations.

5. Feel free to add information about other programs, procedures, processes, practices, attitudes or other information about the employer that you feel is relevant to your nomination for the Governor’s Employer Award.

6. A completed nomination must include a minimum of two support documents, i.e., support letters, letters of recommendation, or news articles, only from colleagues, employers, customers, co-workers, friends and family members. Support letters from nominators will not be accepted. Support documents can be uploaded with the electronic nomination, sent along with a typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019

A completed nomination must include two photos and signed release forms found on page 18. Please include in the file name the business name and the last name of the individual(s). The photos and signed release forms can be uploaded with the electronic nomination; can be sent along with the typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.

Award Ceremony PowerPoint Presentation

During the Award Ceremony, each nominee is introduced with a PowerPoint slide and asked to come forward to receive a certificate. Please recommend the wording to be used on the slide describing the nominee’s efforts being recognized.

By submitting this nomination, I attest the information I am providing is accurate and complete. I have obtained the necessary permission and releases for the information and photos being submitted. I also understand the information I am providing may be used for local, state or national publicity.

Nominator’s Signature ____________________________ Date __________

The Nomination Deadline is August 27, 2019

Electronic nominations should be submitted to Survey Monkey (full URL: https://www.surveymonkey.com/r/JQPMW5T)
Governor’s Youth Employer Award

Youth Employers are private, non-profit or public employers who sponsor programs or events promoting employment preparation and job skills training for youth with disabilities.

Nomination

Business Name: ________________________________________________________________

Business Address: ______________________________________________________________

Contact Person’s Name: _________________________________________________________

Contact Person’s Phone: _______________________ Email: ____________________________

Nominated by: _________________________ Phone Number: ______________________________

Nominator Address: ______________________________________________________________

Nominator Email: ________________________________________________________________

Questions: Please include as many specific examples as possible to help demonstrate why this employer deserves to receive this award. All questions must be answered for a nomination to be complete with N/A an acceptable response. We understand there may be overlap in the responses provided below. All five questions total 100 points. As shown below, each question has a maximum number of points. The Selection Committee members rate each response and the support materials submitted. (Please note: the online Survey Monkey numbers the questions differently.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Max Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Describe the organization’s most successful practices to recruit youth with disabilities.</td>
<td>30</td>
</tr>
<tr>
<td>2. Describe the nominee's efforts to provide opportunities for work-based learning experiences, such as internships, student transition programs, mentoring events and job shadowing for youth with disabilities.</td>
<td>30</td>
</tr>
<tr>
<td>3. If applicable, describe the nominee's success in hiring youth with disabilities for paid positions in competitive employment with the nominee’s business or elsewhere. Please include as many specific examples as you can. (All employers considered for these awards must pay workers with disabilities the Washington State minimum wage of $12.00 per hour or higher and provide employee benefits as other similarly situated employees.)</td>
<td>10</td>
</tr>
<tr>
<td>4. Feel free to add information about other programs, procedures, processes, practices, attitudes or other information about the employer that you feel is relevant to your nomination for the Governor's Youth Employer Award.</td>
<td>15</td>
</tr>
</tbody>
</table>
5. A completed nomination must include a minimum of **two support documents**, i.e., support letters, letters of recommendation, or news articles, **only** from colleagues, employers, customers, co-workers, friends and family members. Support letters from nominators will not be accepted. Support documents can be uploaded with the electronic nomination, sent along with a typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019

Note: videos **will not** be accepted as part of the nomination packet.

A completed nomination must include two photos and signed release forms found on page 18. Please include in the file name the business name and the last name of the individual(s). The photos and signed release forms can be uploaded with the electronic nomination; can be sent along with the typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019

**Award Ceremony PowerPoint Presentation**

During the Award Ceremony, each nominee is introduced with a PowerPoint slide and asked to come forward to receive a certificate. Please recommend the wording to be used on the slide describing the nominee’s efforts being recognized.

By submitting this nomination, I attest the information I am providing is accurate and complete. I have obtained the necessary permission and releases for the information and photos being submitted. I also understand the information I am providing may be used for local, state or national publicity.

______________________________  ______________________________
Nominator’s Signature                  Date

The Nomination Deadline is August 27, 2019
Electronic nominations should be submitted to Survey Monkey (full URL: https://www.surveymonkey.com/r/JQPMW5T)
Direct Support Professional Award

This “Life-Time” achievement award recognizes exceptional professionals who provide long-term support and services to individuals with intellectual, developmental, and/or psychological disabilities. To qualify for this award, the nominee must now be in the direct support position and have been in the position for a minimum of one year. The Direct Support Professional Award nominees are judged on their success in using their expertise and best practices to create meaningful, inclusive employment environments for individuals with disabilities. A strong nomination will provide examples of qualities such as resourcefulness, commitment, consistency, innovation, respectfulness and problem-solving. Nominees will demonstrate their tenacity through the assessment process of job search assistance and/or ongoing job retention services.

Nomination

Person Nominated: ________________________________________________________________

Phone: ______________________________ Email: ______________________________

Title/Position: ________________________ Length Of Time In Position: ________________

Agency/Organization: ___________________________________________________________

Agency/Organization Address: ___________________________________________________

Nominated by: _________________________ Phone Number: __________________________

Business Name: _________________________ Nominator Address: ______________________

Nominator Email: ___________________________ ____________________________

Questions: Please include as many specific examples as possible to help demonstrate why this nominee deserves to receive this award. All questions must be answered for a nomination to be complete with N/A an acceptable response. We understand there may be overlap in the responses provided below. All five questions total 100 points. As shown below, each question has a maximum number of points. The Selection Committee members rate each response and the support materials submitted. (Please note: the online Survey Monkey numbers the questions differently.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Max Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What characteristics make the nominee exceptional in his/her position? (Provide detailed examples of what makes this nominee outstanding. This may include tenacity, attitude, creativity, interpersonal/communication skills, or other abilities.)</td>
<td>30</td>
</tr>
<tr>
<td>2. What specific achievements or contributions has the nominee made in supporting persons with disabilities to find meaningful employment? (This may include career assessment techniques, job search assistance, job carving, etc.)</td>
<td>25</td>
</tr>
</tbody>
</table>
3. What specific achievements or contributions has the nominee made in supporting persons with disabilities succeed in their workplace? Provide specific details that may include how the nominee
  • helps build natural supports
  • assists individuals advance in their career
  • creates positive change
  • demonstrates unique barrier removal skills
  • identifies transportation solutions
  • develops unique job coaching techniques that lead to job retention etc.

Max Points: 15

4. Feel free to add information about other programs, procedures, processes, practices, attitudes or other information about the person that you feel is relevant to your nomination for the Governor's Direct Support Professional Award.

Max Points: 15

5. A completed nomination must include a minimum of two support documents, i.e., support letters, letters of recommendation, or news articles, only from colleagues, employers, customers, co-workers, friends and family members. Support letters from nominators will not be accepted. Support documents can be uploaded with the electronic nomination, sent along with a typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.

Note: videos will not be accepted as part of the nomination packet.

Max Points: 15

A completed nomination must include two photos and signed release forms found on page 18. Please include in the file name the business name and the last name of the individual(s). The photos and signed release forms can be uploaded with the electronic nomination; can be sent along with a typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.

Award Ceremony PowerPoint Presentation

During the Award Ceremony, each nominee is introduced with a PowerPoint slide and asked to come forward to receive a certificate. Please recommend the wording to be used on the slide describing the nominee’s efforts being recognized.

By submitting this nomination, I attest the information I am providing is accurate and complete. I have obtained the necessary permission and releases for the information and photos being submitted. I also understand the information I am providing may be used for local, state or national publicity.

The Nomination Deadline is August 27, 2019

Electronic nominations should be submitted to Survey Monkey (full URL: https://www.surveymonkey.com/r/JQPMW5T)
Governor’s Trophy in Memory of Carolyn Blair Brown

The Governor’s Trophy in Memory of Carolyn Blair Brown award honors an individual with a disability who has developed or influenced programs, services, legislation, etc. resulting in positive outcomes enhancing the empowerment of individuals with disabilities in Washington State.

Nomination

Person Nominated: ____________________________________________________________

Person’s Address: ____________________________________________________________

Phone: _______________________________ Email: ________________________________

Nominated by: ______________________ Phone Number: __________________________

Business Name: ______________________ Nominator Address: ______________________

Nominator Email: ______________________

Questions: Please include as many specific examples as possible to help demonstrate why this individual deserves to receive this award. All questions must be answered for a nomination to be complete with N/A an acceptable response. We understand there may be overlap in the responses provided below. All four questions total 100 points. As shown below, each question has a maximum number of points. The Selection Committee members rate each response and the support materials submitted. (Please note: the online Survey Monkey numbers the questions differently.)

<table>
<thead>
<tr>
<th>Max Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Provide an overview of why this individual deserves to be recognized, describing the nominee’s dedication, activities or actions that result in tangible, positive outcomes dramatically enhancing the empowerment of individuals with disabilities at local, state and/or national levels.</td>
</tr>
<tr>
<td>2. List any recognition this individual has received from other agencies or disability organizations supporting this nomination. Provide the date of the recognition and reasons for their acknowledgement.</td>
</tr>
<tr>
<td>3. Feel free to add information about other programs, procedures, processes, practices, examples or other information about the nominee you feel is relevant to this nomination for the Governor's Trophy in Memory of Carolyn Blair Brown award.</td>
</tr>
<tr>
<td>4. A completed nomination must include a minimum of two support documents, i.e., support letters, letters of recommendation, or news articles, only from colleagues, employers, customers, co-workers, friends and family members. Support letters from nominators will not be accepted. Support documents can be uploaded with the electronic nomination, sent along with a typed nomination or can be forwarded by</td>
</tr>
</tbody>
</table>
email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.
Note: videos will not be accepted as part of the nomination packet.

A completed nomination must include two photos and signed release forms found on page 18. Please include in the file name the business name and the last name of the individual(s). The photos and signed release forms can be uploaded with the electronic nomination; can be sent along with a typed nomination or can be forwarded by email to the GCDE office (GCDEawards@esd.wa.gov) by September 3rd, 2019.

**Award Ceremony PowerPoint Presentation**

During the Award Ceremony, each nominee is introduced with a PowerPoint slide and asked to come forward to receive a certificate. Please recommend the wording to be used on the slide describing the nominee’s efforts being recognized.

By submitting this nomination, I attest the information I am providing is accurate and complete. I have obtained the necessary permission and releases for the information and photos being submitted. I also understand the information I am providing may be used for local, state or national publicity.

_________________________  _______________________
Nominator’s Signature       Date

The Nomination Deadline is August 27, 2019
Electronic nominations should be submitted to Survey Monkey (full URL: [https://www.surveymonkey.com/r/JQPMW5T](https://www.surveymonkey.com/r/JQPMW5T))
Dear Employer,

I am writing to inform you that (Nominator) wants to nominate your business for the 2019 Washington State Governor’s Employer Award. The Award recognizes Public, Private and Non-Profit Employers for their efforts to recruit, hire and promote individuals with disabilities.

I believe you are worthy of this recognition and would like your assistance in completing the nomination. Attached is a “Congratulations” form I would like you to take a moment to complete. By doing so, it allows you the opportunity to tell us some things about your practices and efforts that I may not be aware of. If you’d prefer to respond to these questions over the phone, feel free to contact me (insert contact name and phone number) and I will gather your information.

In addition, the nomination requires a couple of photos of your workers with disabilities to include in the Governor’s Award ceremony which will be held this fall. I’d like to set up a time that would be convenient for you, to come to your business and take a couple of pictures.

If you have any questions, please let me know. Thank you for being a leader in the community and for the part you play in empowering individuals with disabilities through the opportunity to work.

Sincerely,
Employer Congratulations! Form Letter

You have been nominated for a Washington State Governor’s Employer Award

Please fill out this form so we can complete the nomination:

Business Name: _______________________________________________________

Business Address: _______________________________________________________

Contact Person’s Name: ___________________________________________________

Contact Person’s Email: ___________________________________________________

Type:
Private, non-profit: _________

Public type:  ☐ City  ☐ County  ☐ State  ☐ Municipality  ☐ Federal

Size:  ☐ Small (25 or less employees)  ☐ Medium (26-249 employees)  ☐ Large (250 or more employees)

Total Number of Staff: _______ # of Staff with disabilities: _______

Please answer the following questions on a separate sheet of paper:

1. Describe your specific strategies for hiring, recruiting or advancing workers with disabilities such as targeted recruitment efforts, working with job coaches, vocational counselors, developing policies for inclusion and staff training.

2. Share examples of a successful hire or positive experience you have had with a person with a disability in your workplace.

The person listed below will contact you to schedule a time to take photos for the award

Nominated by: ___________________________ Phone Number: ___________________________  
Nominator Address: ___________________________ Nominator Email: ___________________________
**Publication, video and website consent & release agreement**

Governor’s Committee on Disability Issues and Employment

The committee seeks permission to use your photo, name, voice, statement, written work and/or art

Governor’s Committee on Disability Issues and Employment (GCDE) employees and members of the public are occasionally asked to be a part of GCDE’s publicity, publications, and/or public relations activities, which may include representation in the media.

This signed form indicates agreement that the subject’s name, picture, art, written work, voice, verbal statements and/or portraits (video or still) may appear in the committee’s publications, videos and/or website, or in print, social or broadcast media. These images may or may not personally identify the subject. The subject also agrees that:

- No money shall be paid.
- Consent and release have been given willingly.
- The name, picture, art, written work, voice, verbal statements, portraits (video or still) may be used in the future.

Governor’s Committee on Disability Issues and Employment, agrees that the subject’s name, picture, art, written work, voice, verbal statements and/or portraits (video or still) shall be used only for public relations, public information, event or project promotion, publicity and instruction.

If the subject or, in the case of a minor child, parent or guardian wish to rescind this agreement, he or she may do so at any time with written notice.

**Agreement**

I authorize the Governor’s Committee on Disability Issues and Employment to use my name, voice, verbal statements, and/or any photographs, film, digital recording or videotape that may contain my likeness, for publicity or informational purposes. This includes the editing, duplication, reproduction, copyright, representation in the media, exhibition, broadcast, posting on GCDE’s website, and/or other non-profit use and distribution of such photographs for purposes deemed suitable by GCDE, unless I make my wishes to the contrary known. I understand that my image or information that I provide may be used without my review.

<table>
<thead>
<tr>
<th>Subject (print name)</th>
<th>Signature of</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

subject Date

Phone number

If subject is a minor child (less than 18 years old), complete the following section.

<table>
<thead>
<tr>
<th>Guardian (print name)</th>
<th>Signature of guardian</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Minor (print name)

Date

Phone
2019 Governor’s Employer Awards Program Recipients

2018 Governor's Trophy

Don Kay

Don Kay pictured with Governor Inslee and other DVR staff holding his trophy

2018 Direct Support Professional of the Year

Paula Bouwer

A photo of Paula Bouwer with Governor Inslee

2018 Medium Non-Profit Employer of the Year

Cascade Public Media

The Cascade team with their trophy & certificate and Governor Inslee
2018 Large Private Employer of the Year

Fred Meyer Store 122

A photo of the Fred Meyer team with their trophy and Governor Inslee

2018 Medium Private Employer of the Year

Kulshan Brewing Company

A photo of nominator Jennifer Huard from Work Opportunities with Governor Inslee and their trophy

2018 Small Private Employer of the Year

Gigglechops Dog Wash

Gigglechops team with their trophy and Governor Inslee
2018 Youth Employer of the Year

Educational Service District 123

ESD 123 team with their trophy and Governor Inslee

2018 Public Employer of the Year

City of Bellevue

A group of six city employees, one of whom is holding the trophy, with Governor Inslee who is kneeling.