

BUSINESS PERSON OF THE MONTH AWARD

Person Being Nominated:	
Name of Business:	
Name of Business Owner(s):	
Business Description:	
Number of years in business under current o	ownership
Number of Full-time employees	Number of Part-time
(If more space is needed, use back of form o	r additional pages)
Why nominee should be considered for awar	rd
What makes the business unique?	
What business challenges have been overcom	ne?
In what ways has the community and/or Cha	umber benefited by association with this business?
I verify that the information provided is accu	rate, to the best of my knowledge.
Signature	Date