

**Collaboration Excellence Award Nomination**

The Excellence Award in Collaboration recognizes the lead organization in an effort by two or more nonprofit organizations that have partnered to address a problem that could not have been solved as effectively by the individual organization(s).

**Nominations will effectively convey the following criteria about the collaboration:**

1. Identified an approach to respond to a pressing need which could be better addressed by working collaboratively
2. Achieved goals by communicating effectively, sharing information, and instituting clear guidelines and a process for accountability
3. Demonstrated effective allocation and use of combined resources in a way that furthered the missions of all involved organizations
4. Achieved meaningful and measureable outcomes that were made possible through collaborative efforts

**Deadline:** The deadline for all nominations is **March 12, 2013.**

**Submission Instructions:**

Please answer the questions below and return **ONLY THE NOMINATION FORM**, which begins on the following page (please do not save this page in your submission).

Email all completed nominations, as a word document (not a PDF), to Hillary Kovash at [hkovash@massnonprofitnet.org](mailto:hkovash@massnonprofitnet.org) and include “Collaboration Nomination, Nominee’s Last Name” in the subject line.

**Additional Information:**

Refer to the Excellence Award FAQ page on the MNN website for more information about Nonprofit Awareness Day and the Excellence Award judging process.

**Questions:**

Please contact Hillary Kovash at [hkovash@massnonprofitnet.org](mailto:hkovash@massnonprofitnet.org) or 617-330-1188x281.

**Collaboration Excellence Award Nomination Form**

**\*\*Please answer the questions below and return ONLY THIS PORTION to** [hkovash@massnonprofitnet.org](mailto:hkovash@massnonprofitnet.org)**.\*\***

1. **Nominee Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Provide a brief overview of the lead organization, including mission, approximate size and date established, programs and services offered, and populations served, as well as relevant information about the collaborating organizations.** *(200 word limit)*

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1. **Briefly describe the target need or issue identified and the steps taken through the collaborative efforts to address the need or issue.** *(200 word limit)*

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1. **With the above criteria in mind, describe why this collaborative effort would qualify them for this award. Please use specific examples.** *(200 word limit)*

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1. **Provide a clear description of the outcomes achieved in this area and how the actions described above led to these outcomes. Please be as specific as possible.** *(200 word limit)*

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1. **Nominee Contact Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Nominator Contact Information:** *(Please leave blank if self-nominating.)*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_