

**Innovation Excellence Award Nomination**

The Excellence Award in Innovation recognizes a nonprofit organization that has utilized new models, solutions or strategies to adapt to a changing environment and/or to find new ways of solving problems faced by the organization or the populations it serves.

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

1. Instituted new model, solution or strategy to address an identified need or challenge
2. Successfully addressed compelling need or challenge
3. Included a plan for continued sustainability of new model, solution or strategy
4. Achieved meaningful and measureable outcomes

**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 and include “Innovation 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 or 617-330-1188x281.

**Innovation Excellence Award Nomination Form**

**\*\*Please answer the questions below and return ONLY THIS PORTION to**

hkovash@massnonprofitnet.org**.\*\***

1. **Nominee Information:**

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

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

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

1. **Provide a brief overview of the organization, including mission, approximate size and date established, programs and services offered, and populations served.** *(200 word limit)*

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1. **Briefly describe the need or challenge addressed and what innovative approach was used to address this issue.** *(200 word limit)*

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1. **With the above criteria in mind, describe why the innovative approach of this organization would qualify it 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_