Disability Employment Awareness Award

2016 Employer Nomination Form

The Disability Employment Awareness Award is presented to an **Arlington Heights Employer** who proactively recruits, hires, and employs persons with disabilities. Self nominations are encouraged.

All nominations must be postmarked no later than Friday September 2, 2016
Please print or type in order for all information to be legible.

Company Name: _____

Company Address: _____

Telephone:_____ Email Address: _____

Company Contact:_____

Please describe the reason(s) your nominee deserves the Disability Employment Awareness Award?

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Please attach additional pages as needed.

Submitted by: _____

Name: _____Relationship to Employer: _____

Address: _____State: _____ Zip Code: _____

Telephone: _____ Cell/Mobile: _____

The Disability Employment Awareness Award is sponsored by the Arlington Heights Commission for Citizens with Disabilities. Forward submissions to: Village of Arlington Heights, c/o David Robb, 33 S. Arlington Heights Road, Arlington Heights, IL 60005

Disability Services – Village of Arlington Heights – 847.368.5793 Voice
847.368-5980 Fax or email: drobb@vah.com