

ESOP Company of the Year – Helpful Ideas

The items below are provided to assist you in putting together material for your company’s nomination. Not all of the items listed will apply to every company. ***Please do not feel that you must address all of the items listed in order to submit a nomination for this award.***

Company Name	
Company Address	
Contact Person Name	
Phone Number	
Email Address	

Company History

- Year company was established and by whom.
- Brief description of company products/services offered.
- Is your company an S Corp or C Corp ESOP?
- Company mission statement.
- ESOP history: date and reason ESOP was created.
- Percentage of ownership
- Number of participating employees.
- List methods used to make employees feel and think like owners

Additional Company information relating to ESOP:

Check all that apply. You may also provide a sheet describing any of the items listed below in further detail.

<input type="checkbox"/>	Have ESOP committee. (Describe roles and responsibilities of committee, number of members, frequency of meeting, etc.)
<input type="checkbox"/>	Have ESOP Employee Advisory Committee that is elected by employees
<input type="checkbox"/>	Provide non-management employee with seat on company Board of Directors
<input type="checkbox"/>	Have a non-management employee serve as an ESOP Trustee
<input type="checkbox"/>	Have pass-through voting for Board of Directors
<input type="checkbox"/>	Pay dividend/distribution to active ESOP participants
<input type="checkbox"/>	ESOP provides for in-service distributions other than diversification
<input type="checkbox"/>	Lobby/contact elected officials on ESOP issues
<input type="checkbox"/>	Invited a local Congressman/woman to visit your company. (list who and when)
<input type="checkbox"/>	Have web site with section on employee ownership
<input type="checkbox"/>	Company shirts, pens, mugs, etc. that say employee owned
<input type="checkbox"/>	Distribute ESOP and/or MAC newsletter to employees
<input type="checkbox"/>	Received media recognition as a great place to work
<input type="checkbox"/>	Contribute to ESOP PAC
<input type="checkbox"/>	Contribution to Employee Ownership Foundation
<input type="checkbox"/>	Host or sponsor state chapter event
<input type="checkbox"/>	Had an employee owner from your company serve as a Chapter Officer or committee member
<input type="checkbox"/>	Participate in chapter and national events and meetings.
<input type="checkbox"/>	Submitted a poster for the Employee Ownership Month Poster Contest

ESOP Employee Owner of the Year – Helpful Ideas

The Employee Owner of the Year should be an employee below the level of senior management. Despite the lack of a firm rule stating the employee owner has to be an hourly or non-management employee, these two terms can be general guides for the selection process.

The items below are provided to assist you in putting together material for your employee owner’s nomination. Not all of the items listed will apply to the person you are nominating. ***Please do not feel that you must address all of the items listed in order to submit a nomination for this award.***

Employee Owner Name	
Company Name	
Company Address	
Contact Person Name	
Phone Number	
Email Address	

Background Information:

- When did the person join your company?
- What types of positions has the person held while employed at your company?
- What position does the person currently hold at your company?

ESOP Related Information Regarding the Person Being Nominated:

Check all that apply. Please also provide a sheet briefly describing the items below in further detail (years of service, types of events/activities involved in, titles, roles, etc.)

<input type="checkbox"/>	Presently serves or has previously served on a company ESOP committee. (List: Role on committee, number of years served, any specific contributions.)
<input type="checkbox"/>	Held a seat on the company Board of Directors.
<input type="checkbox"/>	Served as an ESOP trustee.
<input type="checkbox"/>	Been involved in helping to produce company newsletter.
<input type="checkbox"/>	Organized or participated in the organization of any company ESOP award entries/nominations.
<input type="checkbox"/>	Lobbied and/or contacted elected officials on ESOP issues.
<input type="checkbox"/>	Organized activities for Employee Ownership Month.
<input type="checkbox"/>	Organized or participated in organizing company events.
<input type="checkbox"/>	Served as a mentor, or been involved in the orientation process for new employee owners.
<input type="checkbox"/>	Explained the ESOP and/or ESOP statements to other employee owners.
<input type="checkbox"/>	Won a company award. (List when and type of award)
<input type="checkbox"/>	Contributed to the company’s overall ESOP culture. (Explain)
<input type="checkbox"/>	Attended a Chapter meeting or event. (List event(s) and date(s))
<input type="checkbox"/>	Attended a National ESOP meeting/event/conference. (List event(s) and date(s))
<input type="checkbox"/>	Served as a Chapter officer or Executive Committee member.