## NOMINATE A VENDOR, SUPPLIER, OR YOUR FAVORITE BUSINESS OWNER TODAY!

# **Annual JEWEL Awards NOMINATION FORM**

### **JMCAACC**



www.jmcaac.org

Nominations are now being accepted for the 24<sup>th</sup> Annual Jewel Awards, honoring African American small business owners and entrepreneurs. Winners will be announced at our live event on February 15, 2025, at the Carl Perkins Civic Center. You or your organization may nominate a business or feel free to nominate your own qualified business. To receive an application packet, interested persons/businesses should complete the information below and mail or email to:

Jackson Madison County African American Chamber of Commerce P.O. Box 703 Jackson, TN 38302-0703

Nomination period November 25, 2024 - January 10, 2025 For more information, call 731-424-2030 or email jacksonmcaacc@gmail.com

Name of Business			
Contact Person			
Address			
City	State	_Zip	
Phone	Email		
No. of years in business	Field/Industry		
Award Categories & Eligibility:  Ruby – 1-5 years in business (open to JMCAACC members and non-members)  Diamond – 6-10 years in business (open to JMCAACC members and non-members)  Emerald – 11-20 years in businesses (open to JMCAACC members only)  Jewel – 20+ years in business (open to JMCAACC members only)			
Nominated by	Phone		
Email	Are you a Chan	nber member?	

Note: This is a two-step process. Upon receipt of nomination, a full application packet will be sent to the nominee with a request to complete the business profile and letters of support. A representative of the business must complete the forms and return the completed packet to the address above.

If you have questions, contact our Executive Director, Don A. McCorry at 731.506.8219.

## JEWEL AWARDS NOMINATION FORM - 2025

#### **Eligibility Criteria**

- \*Applicant must be an African American with 51% of ownership.
- \*Applicant must be a for profit and licensed business operating for a minimum of one (1) year.
- \*Present business portfolio.

#### **Jewel Awards Entry Application**

Name of Business		
Business Address		
Name of Owner (s)		
Year Established		
Type of operation (Please Check):  Sole Proprietorship partnership Corporation		
Percentage of African American Ownership		
Description of Products and Services:  Retail Industrial Service		
What is the estimated percentage that your business has grown since opening?		
Please include all the following in the Business portfolio;		

- 1. Typed list of pertinent facts about business that makes it superior to others
  - a. Include description, pictures, brochures, etc.
- 2. A copy of current business license
- 3. Typed list of Community involvement
  - a. Include awards, newspaper articles
- 4. Two (2) typed letters of comments from clients/customers
- 5. One (1) typed letter of comments from employees, co-workers, and/or owner (if owners and manager are not one in the same).
- 6. Typed description of your business' innovation
  - a. Improvements to existing products/services
- 7. A photo of owner(s) and/or staff with the business