



THE LOWCOUNTRY MANUFACTURERS COUNCIL PRESENTS THE

WORKFORCE DEVELOPMENT "GEARS OF EXCELLENCE" LEADERSHIP AWARD

IN RECOGNITION OF COMMUNITY INVOLVEMENT, COMMITMENT TO EDUCATION, PROMOTING CAREERS IN MANUFACTURING, AND HAVING A POSITIVE IMPACT ON THE REGION'S CURRENT AND FUTURE WORKFORCE.

Award Overview

Eligibility

Any full-time employee of a manufacturing firm located in Charleston, Berkeley or Dorchester counties. May be self-nominated or nominated by another person. Nominations must be received by **Friday, October 2, 2009.**

Process

Nominations will be reviewed by a panel made up of representatives from the LMC Workforce Development Committee and LMC Board of Directors. The award recipient will be announced at the LMC Annual Meeting & Dinner on Tuesday, October 20, 2009, at The College Center at Trident Technical College.

The panel will be looking for examples of the following:

- **Professional excellence:** List specific accomplishments demonstrating excellence in his/her field that relate to workforce development
- **Leadership:** Give specific examples of how s/he demonstrated leadership in the community or at the workplace that impacted education or workforce development
- **Vision:** Offer examples of how nominee has demonstrated vision as a leader as it related to education in the community and workforce needs
- **Community service:** Describe community involvement related to in-school programs, workforce development initiatives or other education related activities
- **Mentoring:** Give examples of how s/he has mentored others in the community or the workplace that had an impact on education and workforce programs

Please complete the nomination form and submit via U.S. Mail, E-mail, or fax to the following :

Ms. Jennifer DeWitt
Lowcountry Manufacturers Council
P.O. Box 61569
North Charleston, SC 29419
Email: jdewitt@lmcsc.org
Phone: (843) 574-6300
Fax: (843) 574-6776

Nomination Form – LMC Workforce Development “Gears of Excellence” Leadership Award

Nominator’s Information

Full Name: _____ Title: _____

Company: _____

Address: _____ City/State/Zip _____

Phone: _____ Email: _____

Nominee’s Information:

Nominee’s Full Name: _____ Title: _____

Nominee’s Employer: _____

Address: _____ City/State/Zip _____

Phone: _____ Email: _____

Answers to the following may be submitted as a separate attachment.

1. Describe in one to three paragraphs why you think the nominee should receive this award:

2. List the nominee's outstanding achievements, where s/he volunteers, mentors, programs s/he supports or other activities that demonstrate his or her commitment to improving the current and future workforce.