# 2024 Texas Workforce Commission Annual Conference

# Local Employer of Excellence Award

## **Instructions for Submitting the Nomination Form**

The Texas Workforce Commission (TWC) recommends using this document to develop submission responses before completing the nomination in Microsoft Forms. Most fields are required; however, if there is no response for a field, enter “N/A.” Select “Submit” to submit the nomination form. Upon submission of the form, a thank-you message will appear on the screen.

For questions regarding the TWC Workforce Awards, please email the Awards Committee at awards@twc.texas.gov.

## **Introduction**

The Local Employer of Excellence Award honors one private-sector employer in each local workforce development area (workforce area) whose efforts and initiatives, in relationship with the Texas workforce system, have had a positive effect on workers, the community, and other employers. Nominations should recognize an employer that, as a customer of its Local Workforce Development Board (Board), created or used innovative approaches to support the Texas workforce system’s mission statement and helped ensure that Texas remains economically competitive. Nominations should describe the employer’s involvement with the Texas workforce system and how this partnership benefitted its workforce area.

Each Board may nominate **one** private-sector employer for this award. Private-sector employers are employing units, as defined in Texas Labor Code §201.011(11), and include partnerships, associations, corporations, and educational and nonprofit institutions that are not:

* a political subdivision under TWC Chapter 821 Texas Payday rule §821.4;
* an individual or entity subject to Titles 2, 3, or 4 of the Texas Government Code; or
* a unit of government of another state, the United States, or a foreign nation.

To be eligible for this award, a nominee must operate a business within its workforce area, have one or more employees, and be in good standing overall with the TWC Tax department. Each Board may set its own additional criteria.

## **Board and Employer Nominee Information**

1. For which Board are you submitting this nomination?

2. Provide the following contact information for the individual submitting this nomination on behalf of the Board: **contact name**, **contact phone number**, and **contact email**.

3. Board executive directors and Board chairs must be notified of all Workforce Award nominations submitted on behalf of the Board.

Have you notified the Board executive director and Board chair of this nomination submission and its contents? (Yes or No)

4. Employer’s legal entity name:

5. Doing business as:

6. Employer address (include city and ZIP code—no P.O. boxes):

7. Employer contact name:

8. Employer contact email:

9. Employer contact phone number:

10. All Federal Employer Identification (ID) Numbers (FEIN) (Example: 12-3456789):

11. All employer unemployment insurance tax ID numbers (Example: 12-345678-9):

12. Total number of employees:

13. Preferred branded name of the employer nominee (as it would appear on a trophy and award materials):

14. Submit the nominee’s logo to awards@twc.texas.gov according to the following technical specifications:

* **File Format**
The logo must be in a png or jpg format.
* **Logo Quality**

The logo must be high resolution—300 dpi or greater. Do not use a low-resolution logo copied from the web.

* **Copyright**
Boards must have either permission to use or ownership of photos and graphics.

15. **For the Local Employer of Excellence Slideshow:** Please provide the **name**, **email** **address**, and **phone number** of the individual TWC should coordinate with for media-related questions, as the winner will have a slideshow at the TWC Annual Conference.

16. Review the following statement and enter your name to affirm your awareness of this process.

**Enter your name to affirm the following:**

The Board is aware that TWC will conduct a background review of the nominee’s financial and legal status, including, but not limited to:

* unemployment insurance tax status and delinquency history;
* standing with the Texas Secretary of State and the Texas Comptroller of Public Accounts;
* Texas Payday Law violations and penalty history;
* OSHA violations;
* eligibility to receive federal contracts according to the federal System for Award Management database; and
* lawsuits in the Public Access to Court Electronic Records (PACER) system.

## **Nomination Responses**

17. Describe in no more than 300 words why the Board is nominating this employer and how the employer’s efforts support its workforce area and the Texas workforce system’s goal of ensuring that both employers and workers have the resources and skills Texas needs to remain competitive. (Please note that some of this information will be used for the employer awards booklet, so provide as many specifics as possible.)