



**INDIAN RIVER COUNTY CHAMBER OF COMMERCE  
2024 INDUSTRY APPRECIATION AWARDS  
“ENTREPRENEUR OF THE YEAR”  
NOMINATION FORM**

**en·tre·pre·neur** (ahn-truh-pruh-nu-er) - a person who organizes and manages any enterprise, especially a business, usually with considerable initiative and risk.

**An Entrepreneur has the following qualities:**

- Entrepreneurial Spirit – sets very high standards for self and business, demonstrates strong leadership skills and an unflinching desire and determination to be successful
- Financial Performance – track record in raising funds; quality of past investments; strategies in place for long term sustainability
- Strategic Direction – creates and turns business visions into business realities; demonstrates the ability to produce new and innovative products differentiating themselves from the competition; builds strategic alliances
- Community Impact – measured by revenue, operations or influential presence in the marketplace
- Innovation – pioneers a new approach or business model in product, culture or processes; anticipates and embraces change in the competitive environment
- Personal Integrity – values have earned the respect from staff, competitors, customers and the community

**Please Note: This recognition is intended for businesses that have been in operation for at least 2 years and up to 5 years.**

We acknowledge that in a healthy market economy, businesses will face governmental and competitive challenges. However, we expect all applicants to demonstrate their respect for competitors and government agencies.

**Please submit completed form to:**

Indian River County Chamber of Commerce  
Economic Development Office  
1216 21<sup>st</sup> Street, Vero Beach, FL 32960  
Phone: 772-567-3491 - Fax: 772-778-3181  
[helenec@indianrivered.com](mailto:helenec@indianrivered.com)

**All areas on this form MUST be completed, and nomination signed (page 4) to be considered – Please review Checklist on the last page**

COMPANY NAME \_\_\_\_\_

CONTACT \_\_\_\_\_ POSITION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

YEAR ESTABLISHED IN INDIAN RIVER COUNTY (may not be more than 5 years)

\_\_\_\_\_

**TYPE OF BUSINESS (CHECK ONE)**

\_\_\_ Aviation                      \_\_\_ Life Sciences                      \_\_\_ Information/Technology

\_\_\_ Homeland Security                      \_\_\_ Manufacturing                      \_\_\_ Energy

\_\_\_ Corp. Headquarters                      \_\_\_ Trade/Export Services                      \_\_\_ Marine

\_\_\_ Distribution/Logistics                      \_\_\_ Education/Training                      \_\_\_ Financial/Professional

Other \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR CURRENT BUSINESS LICENSE**

**CONTRIBUTION TO INDIAN RIVER COUNTY'S ECONOMIC GROWTH**

Number of employees currently employed: full-time \_\_\_\_\_ part-time \_\_\_\_\_ 1099 \_\_\_\_\_

Estimated capital investment to build and equip your business \$ \_\_\_\_\_

**DISTINCTIVENESS OF PRODUCT(S) AND/OR SERVICES**

What does your company produce or provide?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is distinctive about your company's product/service?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Continued on next page)*

## COMPANY GROWTH

List company revenues for up to last 5-years

YEAR	GROSS REVENUE (\$)	# OF EMPLOYEES
2019		
2020		
2021		
2022		
2023		
2024 (estimated)		

## PARTNERSHIPS AND CHALLENGES OF LAUNCHING THE COMPANY

Describe how your business was launched:

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What challenges did you face in starting your new company and how did you overcome them?

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## STRATEGIES TO REACH COMPANY SALES/GOALS

How do you promote/market your company to potential customers?

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Describe your company's five-year projected sales/revenues. Briefly explain the primary business strategy that is expected to support these projections (such as acquisitions, organic growth, development of new product lines, mergers, etc.)

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## CORPORATE CITIZENSHIP

Check your company affiliations through membership or contribution:

\_\_\_ Chamber(s) of Commerce

\_\_\_ Local/Regional Trade Association: \_\_\_\_\_

\_\_\_ Other (please list): \_\_\_\_\_

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Describe your philosophy regarding corporate community involvement

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Other industry or corporate awards received in past 5 years? Please list:

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NOMINATION SUBMITTED BY:

\_\_\_\_\_  
*I verify that the submitted information is true and accurate to the best of my knowledge*

**Please review the Checklist on the next page prior to submission**

**PLEASE NOTE: Forms must be received by 5pm on  
Wednesday, July 31<sup>st</sup>, 2024 (preferably via email)**

**The Industry Appreciation Awards Event is scheduled for  
Thursday, October 3<sup>rd</sup>, 2024**

**Award recipients will be notified in advance of the Awards  
Event, to make arrangements to attend**

**Photos of the award recipients will be taken directly preceding  
the Awards Event and immediately following the event**

*(Continued on next page)*

**2024 INDUSTRY APPRECIATION AWARDS  
NOMINATION FORM CHECKLIST**

*Did you remember to attach:*

**Copy of your business license**

**Company logo (in color, if possible)**

**Additional information on your company for the Committee to consider – awards, recognitions, positive peer reviews**

***Thank you!***