

**GRQC Performance Excellence Award**

**Application – Part 1**

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| **Applicant Information** |
| Submitting Organization |  |
| Subsidiary/Division |  |
| Street Address |  |
| City, State, Zip |  |

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| --- | --- |
| Top Executive Name |  |
| Top Executive Title |  |

|  |  |
| --- | --- |
| Award Contact Name |  |
| Award Contact Title |  |
| Award Contact Email |  |
| Award Contact Phone |  |

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| **Award Application For:** |

Please check one Sector and one Award Category:

|  |  |  |
| --- | --- | --- |
| [ ] Business | [ ] Customer Excellence |  |
| [ ] Healthcare | [ ] Operations Excellence |  |
| [ ] Education/Government/Not-for-Profit | [ ] Team Excellence |  |

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| **General Project Information:** |
| **Project Title:**  |
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| **Project Summary:**  |
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| **Mission Statement** |
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| **Size of Workforce** |
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| **Organization Product/Service Offering:** |
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