

# 20<sup>th</sup> Annual State Agency Recognition Awards

## Nomination form for the *Agency of the Year Award*



### Eligibility Criteria

Awarded to a California state department, agency, board, commission, office, university, etc. The data from the Consolidated Annual Report (CAR) will be used, along with this nomination, to determine the winner of this award. Therefore, this nomination is not required to win this award, however, it contributes to the overall evaluation process. Additionally, this nomination may be used to determine the winner of the Secretary's Special Achievement award and/or the Governor's award.

### Nominator's Information

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Email: \_\_\_\_\_

### Department Information

Name of Department: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Email: \_\_\_\_\_

Dept. Advocate: \_\_\_\_\_ Advocate's Phone: \_\_\_\_\_

Department Head: \_\_\_\_\_

### SB Participation Percent

FY 18-19: \_\_\_\_\_

FY 17-18: \_\_\_\_\_

FY 16-17: \_\_\_\_\_

### DVBE Participation Percent

FY 18-19: \_\_\_\_\_

FY 17-18: \_\_\_\_\_

FY 16-17: \_\_\_\_\_

### **BEFORE COMPLETING THE NOMINATION FORM, PLEASE READ THESE INSTRUCTIONS.**

Using the questions below, please complete the form fields in detail and be as descriptive as possible. Be sure to compare current fiscal year information, including numerical data, to prior fiscal year(s). A nomination that does not provide detailed information or that replicates a previous nomination will not be considered. **All questions are for fiscal year 2018-19.**

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**Justification for Nomination**

What efforts contributed to the increase in SB/DVBE contracting participation for the department?

Has the department met one or both SB/DVBE contracting goals? If so, explain why these efforts deserve recognition.

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**Outreach Efforts**

How has this department increased their visibility to the SB/DVBE community?

How many SB/DVBE events has this department participated in? Tell us about the department's supplier engagement with SB/DVBEs (e.g. mentoring, counseling, one-on-one meetings).

Does this department work with other departments and/or resource partners to educate SB/DVBE suppliers on how to do business with this department? If so, which ones?

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**Performance Measurements**

Does this department have a formal SB/DVBE First policy in place?

Yes

No

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## **Notable Improvements**

What efforts did the department make to include new SB/DVBE suppliers in contract opportunities?

What contracting practices does the department have to support procurement staff in increasing SB/DVBE contracting participation?

How will the department continue to improve their SB/DVBE participation?

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After completing the nomination form, please save it as a PDF file with the following title: "2019 Agency – Name of Agency" (e.g. 2019 Agency – Department of General Services). Then email the form to [dgssara@dgs.ca.gov](mailto:dgssara@dgs.ca.gov).

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