2016 WI-CARH AWARD NOMINATION Universal Application Form for All Awards

Name of Person/Property Being Nominated for an Award:			
Name of Management Company (if applicable):			
Property Name:			
Property Address:			
SELECT AWARD CATEGORY:			
☐ Site Manager of the Year			
☐ Limited Profit ☐ Non-Profit			
Number of units managed: Length of Employment:			
Town Population:			
Choose all of the financing that applies: \Box LIHTC \Box RD \Box HOME \Box HUD			
□ Other:			
Choose one of the following: Elderly Family Rental Assistance: # of Units			
**A minimum of one tenant testimonial is required. Please attach.			
☐ Maintenance Person of the Year			
☐ Limited Profit ☐ Non-Profit			
Number of units responsible for: Length of Employment:			
Average Number of Service Requests per Day:			
Average Response Time to Service Requests:			
Choose one of the following: \Box Elderly \Box Family			
Choose all of the following duties/certifications that apply:			
☐ HVAC ☐ Plumbing ☐ Painting ☐ Grounds keeping/Mowing ☐ Other:			
**A minimum of one tenant testimonial is required. Please attach.			
□ Property of the Year			
☐ Limited Profit ☐ Non-Profit			
Number of Units: Age of Property:			
Choose one of the following: □ Elderly □ Family			
Choose all of the financing that applies: □ LIHTC □ RD □ HOME □ HUD			
☐ Other:			

^{*}A minimum of two pictures of the property are required (digital or hard copy is acceptable). Please note that these pictures may be used by WI-CARH in announcing the award.

AWARD NARRATIVE:

- Site Manager of the Year & Maintenance Person of the Year Awards: Describe why this person deserves the award.
 - o Provide specific examples of attributes that they share with others who have achieved excellence in their field (e.g., attributes relating to their attitude, character, commitment, passion, training, compliance, personality, community involvement, decision making, work ethic, accuracy, etc.).
 - Include any achievement awards earned and any times this person went above and beyond the call of duty.

 Explain any un 	Award: Describe why this property deserves nique features/programs for residents (e.g., gree er adults, innovative approaches to financing, expressions of the second seco	en sustainable, services provided for
PERSON SUBMITTING TH	IIS NOMINATION:	
Name:		
Company:		
Address:		
Telephone:	Email:	

NOTE: to be eligible for consideration, this form must be received no later than October 3, 2016.

Send to: WI-CARH, PO Box 346, Cottage Grove, WI 53527 or email to info@wicarh.org