

**AMEREN / ILLINOIS DEVELOPMENT COUNCIL
BUSINESS PARTNERSHIP AWARD**

INSTRUCTIONS

The **AMEREN/IDC BUSINESS PARTNERSHIP AWARD** is open to any private business or enterprise in Illinois. Nominations should address activities that will recognize private businesses or enterprises that demonstrate characteristics of partnership with local development groups and that lend positive support to community and economic development in Illinois.

Submission Deadline: June 18, 2010

Email or Fax to: *Illinois Development Council*
225 East Cook Street, Springfield, IL 62704
217-528-5230 217-241-4683 Fax
susan@ildevelopmentcouncil.org

NOMINATION CRITERIA

All nominations will be reviewed and rated based on the following criteria:

- ✓ Nominations are required to address all Criteria. **Nomination Forms not completed in their entirety will not be considered.**
- ✓ A narrative statement used to answer the questions on the Nomination Form should be no more than four single spaced pages.
- ✓ Nominations must come from an IDC member in good standing.
- ✓ The private business or enterprise must have operations in Illinois.
- ✓ Forms and supporting documentation / narrative statements must be email to susan@ildevelopmentcouncil.org, or faxed to 217-241-4683 by **June 18, 2010**.

Nominees for the Ameren/IDC Business Partnership Award should demonstrate:

- ✓ Extent to which public and private sector participants have formed a true partnership or joint venture (formal or informal)
- ✓ Level of commitment to community
- ✓ Direct economic benefits to the community
- ✓ Spin-off impact of the project
- ✓ Creativity or innovation of partnership

Questions or requests for forms may be directed to:
IDC Office; 225 East Cook Street; Springfield, IL 62704
217-528-5230 ext. 4 / susan@ildevelopmentcouncil.org

Nominations forms can also be found at www.ildevelopmentcouncil.org.

Please read NOMINATION CRITERIA before completing this form.

NOMINATING IDC MEMBER DATA

Name: _____ Title: _____
Organization: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____
Email: _____

PRIMARY CONTACT DATA FOR NOMINATED BUSINESS / ENTERPRISE

Name: _____ Title: _____
Organization: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____
Email: _____

LOCAL DEVELOPMENT CONTACT DATA

Name: _____ Title: _____
Organization: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____
Email: _____

PARTNERSHIP DESCRIPTION

The description should be a maximum of 500 words. Include a summary of the history and purpose of the partnership, the role of each partner and the impact the partnership has had in the community and in the State of Illinois.

Description should address the following questions:

- ✓ What is the goal of the partnership?
- ✓ What resources does each partner contribute?
- ✓ What is the relationship between the partners in the design, execution and measurement of the partnership?
- ✓ What are the primary benefits of the partnership?
- ✓ Who are the primary beneficiaries of this partnership and what specific needs did the partnership set out to meet?
- ✓ What is the measurement process for determining success?

SUPPORTING MATERIALS TO BE PROVIDED

All nominations must include the following supporting material to assist in the judging process:

- ✓ City/County Population (2000 Census)
- ✓ Percent of persons below the poverty level (2000 Census)
- ✓ Per capita income (2000 Census)
- ✓ Total project cost, attaching dollar amounts and total of each source
- ✓ Public/private financing info
- ✓ Actual community benefits generated
- ✓ Actual state benefits generated
- ✓ List of spin-off private/public investments, itemizing direct and indirect
- ✓ A letter of endorsement from the chief elected officer(s) of the community(s) in which the nominated partnership benefits

**THE AMEREN / ILLINOIS DEVELOPMENT COUNCIL
BUSINESS PARTNERSHIP AWARD NOMINATION FORM**

NOMINEE DATA

Name of Business / Enterprise: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Markets / Communities served by the Nominee: _____

Company contact for further information: _____

Telephone: _____ Fax: _____

Email: _____

Attached is additional information: Yes No .

Provide a general description of business operations. Highlight any new or distinctive products and services.

Give examples of how nominee provides community commitment and innovation towards this partnership.

How does the nominee provide community leadership and outreach?

Highlight the company's impact on how this partnership has affected the local economy.

STATEMENT OF SPONSOR

(Sponsor required to be a member in good standing of IDC)

I, _____ having read the foregoing nomination, in full, confirm its accuracy and hereby state I am confident that the business / enterprise demonstrates characteristics of partnership with local development groups and that they lend positive support to community and economic development in Illinois.

Date: _____ Signature/Name of Sponsor: _____

Name of Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email: _____

Please submit completed Form by email to susan@ildevelopmentcouncil.org, or fax to 217-241-4683.