Please answer all questions. Use extra pages if needed for additional information on “Description”.

1. Name of Diverse Business: ________________________________

2. Address: ________________________________________________
   City: ___________________________________ State: _______ Zip: ______________
   Email: ___________________________________ Website: _______________________

3. Nature of Business/Occupation: ______________________________

4. Years involved with diverse suppliers: _________________________

5. Please list/describe the diverse supplier’s products and/or services: __________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

6. Please describe why your company is honoring this diverse supplier for 2022/2023: __________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

7. Diversity Category: ________________________________
   - Small Business (SB)
   - Minority-Owned Business Enterprise (MBE)
   - HUBZone
     - Small Disadvantaged Business (SBD)
     - Women-Owned Small Business (WOSB)
   - Veteran-Owned Small Business (VOSB)
     - Service-Disabled Veteran-Owned Small Business (SDVOSB)
   - Women-Owned Business Enterprise (WBE)

Nominating Company: ________________________________
Contact: ____________________________________________
Email: ______________________________________________
Phone: ______________________________________________

For printing purposes, submit all nominations before **February 29, 2024**.
Submit to supplierdiversity@eei.org. All awards information will be posted publicly.