

Tourism Industry Awards of Excellence: Tourism Employer of the Year

This award recognizes an organization that has developed an admirable reputation as a great place to work, and that has established itself as an upstanding example of Ontario's tourism industry.

Criteria

All nominations are judged against the criteria outlined below. If you wish, you may choose to structure your nomination submission according to the same numbered list. All submissions will be reviewed and judged by an independent committee of industry representatives. Judging of the awards will take place in August 2018.

- 1. Describe the organization. How does its employment model, staffing policies and/or human resources set it apart from other businesses?
- 2. Has the organization earned employer awards or certifications in the past?
- 3. What kinds of programs or policies does the organization have in place that contribute to its reputation as a great employer? (e.g. profit-sharing plans, benefits, employee perks, incentive programs, corporate culture activities, etc.)
- **4.** Include at least two (2) references supporting the nomination, confirming the organization's reputation and credibility.

Eligibility

- 1. Organization must be based in Ontario.
- 2. Organization must have been in operation for at least ten (10) years.
- 3. Organization must have at least three (3) employees/team members.

NOTE: Self-nomination and nomination of a third party are permitted.





ASSOCIATION OF ONTARIO

Tourism Industry Awards of Excellence: Tourism Employer of the Year

Nomination Checklist

| Name of Nominated | Organization: | | |
|--------------------------------|----------------------|--------------------|------------------------------|
| Business Address: | | | |
| | | | |
| Business Telephone: | | | |
| Business Website: | | | |
| Please ensure the fo | ollowing have bee | • | rements in full |
| I have attached | all supporting mater | ials, and understa | nd they will not be returned |
| I have complete page with my s | | ed and dated it, a | nd included it as a cover |
| Name of Person Sul | bmitting Entry/Prima | ary Contact: | |
| Telephone of Person | n Submitting Entry/ | Primary Contact: | |
| Email of Person Sub | omitting Entry/Prima | ry Contact: | |
| | | | |
| Date | e | | Signature |