

Somerset County Bar Foundation

20 N. Bridge Street
P.O. Box 1095
Somerville, NJ 08876
Tel: 908-685-2323 • Fax: 908-685-9839
Email: cawinder@somersetbar.com

2016 COMMUNITY SERVICE AWARD APPLICATION

Please complete the application and return to the Somerset County Bar Foundation Community Awards Selection Committee at the address above. Incomplete applications will not be considered. Please follow the instructions carefully. **The deadline for submission is 5:00 pm June 1, 2016**

Submitting the Application

1. Complete the Application (attached)

Item I: Complete the application being sure to identify the individual completing the application

Item II: Indicate the names and contact information of those submitting the reference letters (see #4 Supplementary Materials below). These references will be contacted for verification of programs, activities and accomplishments of the company and should be familiar with the program or partnering organization.

2. Attach a narrative statement

Describe the company's efforts during the last year. The statement should contain a brief narrative explaining what the company does, its goals, its mission, an overview of key programs and how its programs are related to the legal community. **This should be no more than two pages, typed and double spaced.**

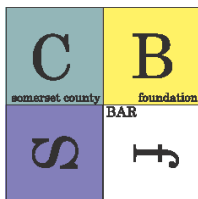
3. Attach two reference letters

At least two supporting reference letters (up to 300 words) must be included with each nomination. They must be written by those in the community that represent groups or organizations that have benefited by the company's efforts. References should not be employees of the company, members of the board of directors of the company or immediate relatives of either.

4. Attach Supplementary Materials

You may submit appropriate supplementary material to document your narrative statement. Additional materials may include, but are not limited to, samples of company policies, company brochures, employee newsletters, company annual reports and photographs. Please note that this material will only be used as a secondary reference to the nomination statement in the final judging. All materials submitted will not be able to be returned.

Please send your application, narrative statement, reference letters and supporting materials to Carol Ann Winder at the Foundation office contact information above.



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Item I: Applicant Information

Company Name: _____

Contact Name and Title : _____ (person responsible for filling out this application)

Mailing Address: _____

Telephone: _____ Fax: _____ Email: _____

Chief Executive Officer: _____ Name & Title _____

Number of Employees: _____ Company's Industry Type _____

Headquarters Location _____ Are you a division or branch of another company? Y/N

If you checked yes, name the company: _____

Item II: References

Name, Title

Organization

Mailing Address

City, State, Zip Code

(Area Code) Telephone

Name, Title

Organization

Mailing Address_

City, State, Zip Code

(Area Code) Telephone