

**AMERICA'S WORKFORCE:
EMPOWERING ALL**

**Harford County Commission for Disabilities
Employment Committee**

EMPLOYEE OF THE YEAR AWARD

This award is given to an individual with a disability who is a resident of Harford County and/or employed in Harford County and has exhibited exceptional ability and determination in entering or re-entering the workforce.

- a. Nominations **MUST** be on designated forms; alternative formats available.
- b. Duplicate forms if additional copies are needed.
- c. Print or type complete answers on **ALL** questions.
- d. Attach additional pages/documentation if necessary.
- e. Mail, email or fax completed forms to:
Commission on Disabilities | 125 N. Main Street | Bel Air, MD 21014
disability@harfordcountymd.gov | 410-803-0433 Fax

f. Nominations must be received by September 21, 2018

- 1. Nominee's Name: _____
Address _____
City, State, Zip _____
Phone: _____
Date of Birth _____
- 2. Employer's Name _____
Address _____
City, State, Zip _____
Phone: _____
- 3. Nominee's Job Title _____
- 4. Describe the barriers the nominee has overcome to become employed/retain employment:



Barry Glassman
County Executive
Amber Shrodes
Director, Community Services

Commission on Disabilities
Harford County Department of Community Services
www.harfordcountymd.gov/services/disabilities
410 638 3373

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5. Outline the nominee's educational and employment background including vocational training and experience which enabled the nominee to enter/re-enter the workforce:

6. Describe the nominee's present employment activities:

7. List other reasons why the nominee should be selected, including community involvement and volunteer work.

Nominator's Name: _____

Please contact me at the following:

Address: _____

City, State, Zip: _____

Phone Number: _____

Signature, Title

Date



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