NJPGA Nominating Form for

Manager* of the Year for 2016

NAME OF OFFICE PE	ERSON:				
COMPANY:					
ADDRESS:					
TELEPHONE: HOM	Æ:/	WOR	WORK:		
(1) How many years wi	ith the company:				
(2) Attendance record:	Good	Excellent	Superior		
(3) Organization skills:	Good	Excellent	Superior		
(4) Rate nominee's appe	earance: Good	Excellent	Superior		
(5) Willingness to do m	ore than job expectation	s: Good F	xcellent Superior	·	
(8) CETP trained:	Yes	No	_		
	of company's products at Excellent		_		
(10) Why should this per (Add additional spa	erson be "Manager of the ce if necessary.)	e Year"?			
Submitted by:	Signature:				
	City/State/Zip:				
	Telephone:				
	C-00800				

*Intended for managers who are not owners or individuals in executive positions.

Submission Deadline: August 15, 2017

Please fax to NJPGA Headquarters at 609-581-8244 or email to njpga@hq4u.com. Thank you.