



Professional Service Award Nomination Form

Recognition for outstanding service performed as an employee of a Rock Falls business or organization

The Professional Service Award honors the long term commitment of a Rock Falls professional. The nominee's service to the community has come directly through the work they have completed as a part of their employment, yet their work has made an outstanding impact on Rock Falls.

Nomination forms must be turned in no later than January 30th for review. The Shoulder to the Wheel Awards Committee will review nominations and select an award recipient to be presented at the Rock Falls Chamber of Commerce Annual Meeting and Dinner. Selections will be made without regard to race, creed, or sex. Nominations for this award will be accepted every year, however awards may not be presented each year.

Name of nominee	
Contact information for nominee	
Through which business(es) or organization(s) has this person impacted the community?	
Your name(s)	
Your address, city, zip	
Your phone number and e-mail	

Does this person's work directly impact Rock Falls? () YES () NO

No recent past, or current chairperson of the Rock Falls Chamber board may be nominated.

- Is the nominee the chairperson or a recent past chairperson? () YES () NO

There is no limit on the number of times a person can be nominated, but a person may only win one time.

- Has this person been nominated before? (to your best knowledge) () YES () NO

- Has this person received this award, the Shoulder to the Wheel, or the Meritorious Service Award before?
() YES () NO

Please answer the following questions on a separate piece of paper and submit with the nomination form.

- Describe how the work this person has done directly impacts the community of Rock Falls in a positive way. (Please explain what specific activities were performed by this person and who they helped. Provide information like when/where these activities were done.)

- Describe how this person has gone above and beyond the call of duty (their regular job description) to make Rock Falls better.

(Please explain why this person stands out from other professionals.)

Return nomination forms to the Rock Falls Chamber, no later than 1/30/22. Mail or deliver to: 601 W. 10th Street, Rock Falls, IL 61071. Please call to arrange e-mail delivery 815-625-4500.

(Form Revised 1/2020)