

15th Annual Tommy Star Awards & Gala

**AWARD NOMINEE FORM**

**Award Categories**

**Attraction/Activity Associate of the Year**

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**Hospitality Support Service Associate of the Year**

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**Public Service**

**Representative of the Year (Government**)

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**Restaurant Associate**

**of the Year**

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**Retail Associate**

**of the Year**

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**Transportation Associate**

**of the Year**

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**Hotel Supervisor**

**of the Year**

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**Hotel Associate**

**of the Year**

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DEADLINE FOR NOMINATIONS

**August 19, 2016**

**IMPORTANT DATES**

**Round One Judging: 9/14/16**

**Finalist Video Filming: 9/26-10/7**

**ACKNOWLEDGE AN OUTSTANDING EMPLOYEE WITHIN THE HOSPITALITY INDUSTRY WITH THE HIGHEST TOURISM INDUSTRY HONOR**

**IN THE US VIRGIN ISLANDS**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**BUSINESS / COMPANY / PROPERTY**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NOMINEES’ FULL NAME**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **JOB TITLE NOMINEE CONTACT #**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AWARD CATEGORY (SEE SIDE PANEL)**

**I CERTIFY THAT THE ABOVE NOMINEE HAS MET ALL OF THE FOLLOWING CRITERIA:**

* A permanent employee for at least one-year Date of Hire: \_\_\_\_\_\_\_\_\_\_\_
* Demonstrates excellent customer service
* Actively participates in community events/ initiatives
* Showcases great pride in their work, islands, and industry
* Must be knowledgeable about the USVI Hospitality Industry

***\*\*Note: If you nominate an employee,***

***it is nominating company/individual financial responsibility***

***to purchase an event ticket ($125) for your nominee.***

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**PRINTED NAME**

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**AUTHORIZED SIGNATURE**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **TELEPHONE FAX**

**US VIRGIN ISLANDS HOTEL & TOURISM ASSOCIATION**

**4002 RAPHUNE HILL SUITE 304**

**ST. THOMAS, USVI 00802**

**T 340-774-6835 F 340-774-4993**

**Nyka@virgin-islands-hotels.com**[**www.usvihta.com**](http://www.usvihta.com)