



geelong  
chamber of commerce  
THE VOICE OF BUSINESS

## OFFICIAL APPLICATION FORM – BUSINESS ENTRY - 2019

Name of Entrant (Company/Department/Individual): \_\_\_\_\_

Postal Address: \_\_\_\_\_  
\_\_\_\_\_

Location of Judges Visit: \_\_\_\_\_  
\_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

In the event that you win an award, please state the name and title of the person (one only) who will accept the award at the Award Presentation Function  
Name: \_\_\_\_\_

Title: \_\_\_\_\_

What is the ownership of the business?  
(Owner operated, corporate, other - please specify) \_\_\_\_\_

How many employees (Full Time Equivalent) do you have? \_\_\_\_\_

Number of words in entry (not including a cover page) \_\_\_\_\_

I have no objection to my business being considered for media coverage including the use of my Business Summary from my official entry  Yes

Please tick the box to confirm that your business/organisation satisfies all regulations and licensing requirements, and that all statutory liabilities - Workcover, income tax, GST, Payroll Tax (if applicable) have been paid.

### SELECTED CATEGORIES (Please tick/highlight)

<input checked="" type="checkbox"/>	Business of the Year (all entries are automatically eligible for Business of the Year)
<input type="checkbox"/>	Advanced Manufacturing & Industry
<input type="checkbox"/>	Best First Year Entry
<input type="checkbox"/>	Clever & Creative Sustainable Business
<input type="checkbox"/>	Corporate Social Responsibility
<input type="checkbox"/>	Customer Service
<input type="checkbox"/>	Digital Engagement
<input type="checkbox"/>	Emerging Business - <i>under 3 years</i>
<input type="checkbox"/>	Health & Wellbeing
<input type="checkbox"/>	Health Promoting Workplace
<input type="checkbox"/>	Home based and Micro Business – <i>1-3 employees/FTE (full time or equivalent)</i>
<input type="checkbox"/>	Inclusive & Accessible Business
<input type="checkbox"/>	Innovation, Research & Development
<input type="checkbox"/>	Medium to Large Business or Division of a business – <i>21+ employees/FTE (full time or equivalent)</i>
<input type="checkbox"/>	Regional Business
<input type="checkbox"/>	Retail Business
<input type="checkbox"/>	Small Business or Division of a business - <i>4 to 20 employees/FTE (full time or equivalent)</i>
<input type="checkbox"/>	Tourism & Hospitality

**Please note:** This form is an overview only and is not to be seen as a substitute for the criteria to be answered in the body of the submission. Submit your entry as a WORD doc on [www.gbea.com.au](http://www.gbea.com.au) and post or deliver four (4) printed copies of your submission with a copy of application form attached to each to: **Deakin University Geelong Business Excellence Awards, Level 2/10 Moorabool St, Geelong 3220**

I \_\_\_\_\_ as \_\_\_\_\_ and an authorised person for this business declare that

- (i) the financial and business performance information included in this entry has been presented so as to give a fair and true record of the trading of the business and
- (ii) at the date of this declaration, there are reasonable ground to believe that the business is solvent and can pay its debts as and when they fall due

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

