

ENTRY REQUIREMENTS

1

Determine the award category that most appropriately matches the project, person, partnership or business that you are nominating.

Please note that projects must be completed to be considered. Entries that have previously received a Desert Peaks Award are not eligible. A list of former recipients is available on the MAG website at: <http://www.azmag.gov/Documents/DesertPeaksWinnersinReview1998-2012.pdf>

Each project may be nominated under only one category. Individuals who are involved in nominated group projects may, however, also be nominated in one individual award category. With permission from the nominee, MAG reserves the right to move nominations that are submitted under an inappropriate category into the appropriate category.

2

Fill out the nomination form for the appropriate category.

For partnership award categories: Please provide all information requested, including the name of the person who will represent the group or project (*Note: this is the individual who will speak on behalf of the project in the event that the nominated project or partnership is selected as the Desert Peaks recipient.*) Also include the contact information for the person making the nomination and a staff contact if appropriate. All group categories require the involvement of at least one MAG member agency. For your convenience, a list of MAG member agencies is provided on the back of this booklet. **For individual award categories:** Please provide all information requested, including the name and contact information of the nominee as well as for the person who is making the nomination, and a staff contact if appropriate. *Please note that electronic nomination forms are also available for download on the MAG website at <http://www.azmag.gov/Projects/Project.asp?CMSID=1083>.*

3

Write a short summary (not to exceed one page) describing the person, project or partnership and how the nominee meets the project and award criteria.

The page should include the name of the nominee and category at the top. Project and award criteria may be found on each nomination form. Margins should be 1" with text size of at least a 12 point typeface. May be single or double spaced on 8½" x 11" paper only.

4

Write up to three (one-sided) pages maximum addressing the following questions:

(Same typeface, spacing and page requirements as above.)

For partnership award categories:

How has the group, project or partnership worked cooperatively in the region?

How has the group, project or partnership benefited the region?

How has the group, project or partnership contributed to the concept of regionalism?

For individual award categories:

How has the nominee met the project criteria?

How have the nominee's efforts benefited the region?

How has the nominee contributed to the concept of regionalism?

5

Submit any supporting documentation you feel might be helpful to the judging panel.

Supporting documentation is not a requirement for entry and is at the discretion of the entrant.

Supportive materials must be on 8½" x 11" paper and must not exceed 10 double-sided pages, or 20 single-sided pages. Documentation may include newspaper articles, brochures, fact sheets, letters of recommendation or other types of descriptive materials.

- **All entries should be bound in a manner conducive to photocopying.**
- **Questions?** Call (602) 254-6300 and ask for Desert Peaks Information. Specify if your question is in regard to nominating procedures.

6

Send nominations to:

Maricopa Association of Governments

Desert Peaks Awards

302 North 1st Avenue, Suite 300, Phoenix, Arizona 85003



ENTRIES MUST BE RECEIVED BY 5:00 P.M., FRIDAY, MARCH 14, 2014.

1 PUBLIC PARTNERSHIP

Project Criteria

The Public Partnership Award is presented to the **group or project** that has demonstrated a commitment to regionalism through public sector or public/nonprofit partnership. Nominations must include at least one MAG member agency. (See *list of member agencies on last page of the Call for Entries instructions.*) Projects must be completed to be considered. **Please list the information for the group or project below and include the partnering MAG member agency(ies). On the next page, list ALL public and public/nonprofit organizations involved.**

Group/Project Title

Individual Representing Group/Project (person who will be accepting award on behalf of the group or project)

List only MAG member agencies below. Provide contact information for these and ALL organizations on the next page of this form.

Title of Individual Representing Group/Project

Organization/Affiliation

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

Please fill out the next page to include ALL participating organizations.

E-mail Address

Award Criteria

Entries will be judged on a variety of factors, including the success of the partnership in promoting, recognizing, demonstrating and attaining the ideals of regionalism. See entry requirements.

Nominated By

Name

Title

Organization

Mailing Address

City/State/Zip Code

Staff Contact (if different than above)

Contact (Area Code) Phone

Contact E-mail Address



Send Nominations to:

Maricopa Association of Governments

Desert Peaks Awards

302 North 1st Avenue, Suite 300, Phoenix, AZ 85003

For additional information, please call (602) 254-6300.

Please return completed applications and any supporting materials by 5:00 p.m., Friday, March 14, 2014.

PUBLIC PARTNERSHIP: Please list ALL organizations involved with this partnership below. Include any agencies listed on the previous nomination page that should be included as a partnering agency. This form may be duplicated for additional participants.

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail

MAG Member Agency or Partnering Organization

Contact Name

Title of Individual

Department/Division (if applicable)

Mailing Address

City/State/Zip Code

(Area Code) Phone

E-mail