

*2018 Award Intent to Apply*

Submission of this form signals your organization’s intention to apply for recognition during the 2018 award cycle. Please complete and email this form to [programs.services@spqa-va.org](mailto:programs.services@spqa-va.org). Upon receipt of this form, you will be invoiced for the non-refundable $500.00 Intent to Apply fee. The intent to apply letter must be sent to SPQA by November 1, 2017.

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| --- | --- |
| Date of this Intent: |  |

**Contact Information**

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| --- | --- |
| Organization Name: |  |
| Highest Ranking Official: |  |
| Title: |  |
| Point of Contact (POC): |  |
| POC Title: |  |
| POC Phone: |  |
| POC E-Mail: |  |
| Organization Address: |  |
| City, State, Zip: |  |

**Business Information**

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| --- | --- | --- | --- | --- |
| Organization Category: | Manufacturing/Service  Education  Health Care  Government  Nonprofit | | | |
| Organization Structure: | Profit  Not-For-Profit | # of Employees in VA or D.C: | |  | |
| Is your organization a business unit of a larger parent organization?:  Yes  No  If yes, what is your parent organization?      \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Also, if yes, are you a distinct entity within the parent organization that can respond to the Criteria?  Yes  No  What is your Main Product or Service?      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  | | | |

**SPQA Information**

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| Your application is for: | 2018 SPQA Award  2018 ACE | | |  |
| Have you applied before? | Yes  No | If “yes” what years? |  | |
| The “intent to apply fee” is: | Will be sent separately following receipt of SPQA’s invoice | | | |
| In submitting this Intent to Apply, your organization is committing to fully support:   1. An Examination Team **Site Visit**, which occurs on two consecutive days and is scheduled between mid April and early May\*. 2. An Examination Report **Feedback Meeting**, which occurs for up to two-hours and is scheduled between mid June and July\*.   \*Note: Exact dates and times are determined in February and March. | | | | |

**Important: Please retain a copy of this form for your files and include one copy with your application package.** Revised J April 2017