



**Performance Excellence Program**



## 2010 Intent to Apply and Eligibility Agreement

Intent to Apply submitted to AQA by.....	May 3, 2010
Applications submitted to AQA by.....	July 16, 2010
Site Visit.....	Sept 27-Oct 1 or Oct 4-8, 2010
Award Recipient(s) Announcement.....	Nov 30-Dec 3, 2010
Feedback Report sent to applicant by.....	Mid-December, 2010

Congratulations! By applying for an Arizona Performance Excellence Program award, you are taking a major step to improve your organization’s performance and growth. Because of the learning inherent in completing the application and in the feedback you will receive, the effort that goes into applying for the Award should result in a significant return on your investment. The process will help you prioritize opportunities for improvement and identify strengths to celebrate. As a result, the rate at which your organization improves should accelerate.

### Organization Eligibility and Restrictions

<b>Specific to All Award applicants</b>	<ul style="list-style-type: none"> <li>• Arizona organization with at least 50% of their assets, revenues, or employees based in Arizona; OR any organization with their organizational headquarters located in Arizona.</li> <li>• An organization that is part of a larger entity must have sufficient autonomy and authority to make decisions, initiate actions, implement programs, and allocate resources free from the direct control of the larger entity. For example, a college within a university is eligible if it can demonstrate sufficient independent control over the factors that affect the quality of its processes and services.</li> <li>• All sectors are eligible – manufacturing, service, healthcare, education, profit, not-for-profit, private, public, local, state or federal. NOTE: Organizations whose purposes are primarily social are not eligible</li> <li>• Must have existed at least one year prior to submitting an Award application</li> <li>• Is a permanent organization; i.e., it must not be an organization unit with a defined limited life or an ad-hoc committee, board, or other such unit.</li> <li>• Must have more than two full-time employees.</li> </ul>
<b>Additional specific to applicants for Showcase in Excellence</b>	<ul style="list-style-type: none"> <li>• All operations related to the Process being considered as part of the Awards Program may be inspected as part of the Awards Program. This means that the process operations, activities, and results can be assessed and visited by a team of examiners.</li> <li>• Different subsidiaries and their parent organization may concurrently apply if submitting different processes.</li> <li>• Recipients of a Showcase Award are ineligible to re-apply for the same process for a period of 3 years after the selection. However, an applicant that did not receive an award is allowed to re-apply for the same process yearly if they feel they have meaningful changes &amp; sufficient improvement and results.</li> </ul>
<b>Additional specific to applicants for State Quality Awards</b>	<ul style="list-style-type: none"> <li>• All major operations of the applicant may be inspected as part of the Awards Program. This means that the organization’s operations, activities, and results can be assessed and visited by a team of examiners</li> <li>• A subsidiary and its parent organization may not apply for the Award in the same year -Different subsidiaries of the same parent organization may concurrently apply</li> <li>• Recipients of the Governor’s Award are ineligible to be recognized as a State Quality Award Recipient for a period of five years after their selection. Recipients of the Pioneer Award may re-apply in any given year, but may not receive the Pioneer Award more than once. A recipient of the Governor’s Award, although not eligible for the award, may still submit an application to obtain a feedback report. This process will be handled as a regular application in all respects except that no award will be granted, regardless of the score received. These restrictions do not have any bearing with concern to the Showcase in Excellence Awards.</li> </ul>

**If you have questions about your organization’s eligibility, please call AQA (480) 874-5815.**

**Base Application Costs:**

- At least 50% of the application fee is due with the submission of the “Intent to Apply”; remainder is due with application submittal.
- If the applicant, for any reason, chooses not to submit the application, the portion submitted with the “Intent to Apply” may be applied towards the next year’s award cycle. It is not refundable.

<b>State Quality Award (SQA)</b>	<b>Member</b>	<b>Non – Member</b>
○ Small (1 to 99 employees)	\$1,610	\$2,070
○ Medium (100 – 499 employees)	\$2,415	\$3,450
○ Large (500 or more employees)	\$3,450	\$4,600
<b>Showcase in Excellence Awards</b> <i>Per submission</i>	\$800	\$1600

**Additional Costs**

- Site visit costs to reimburse examiner team: AQA will bill applicant after site visit.
  - Site visit costs include examiner team’s hotel accommodations, food, transportation, etc.
  - Select dates in the application form below.
  - Site visits for Showcase in Excellence will not exceed 4 hours. Site visit duration for SQA will not exceed 5 days but is dependent on initial review of the application.

**Additional Requirements**

- Because having internal knowledge of the Criteria framework is critical to advancing excellence within your organization, the Arizona Quality Alliance encourages applicant organizations to provide a minimum of one volunteer Examiner to serve in the current Award application cycle.
- To support the organization and program, applicants are encouraged to provide at least one Examiner. Examiner deposit is \$300 or \$400 depending on length of training.
- Upon successful completion of training and successful completion of service on an Award evaluation team, the organization can receive a rebate of their Examiner deposit, less a \$50 processing fee.
- Evaluators can be any staff member within the organization, but are typically senior leaders, quality/improvement professionals, and/or other functional leaders. We seek a variety of expertise on our Board of Evaluators – those representing different sectors (manufacturing, service, non-profit, healthcare, education, and government), those possessing different functional expertise (quality, finance/accounting, human resources, operations, IT, etc.), and those at different levels of leadership.

**By completing and submitting this agreement, the applicant agrees to:**

- Submit an application that follows the guidelines provided in the SQA or Showcase in Excellence application material.
- Provide to AQA an electronic copy of the original application edited for general public consumption.
- Give permission for AQA to use the organization’s recipient status and edited application (see above) for marketing and promotional materials for the Awards program and the AQA.
- Share, if a recipient of an Award, non-proprietary information on successful performance strategies with other Arizona organizations, including participation in AQA Conferences and events.
- Supply information requested by AQA (or other designated representatives) concerning the applicant’s organization if issues are identified that could affect the credibility and valuation of the Awards.

**AQA agrees to the following items:**

- Unless the applicant is selected as a recipient, AQA will not disclose its identity to anyone other than members of the Board of Examiners or the Panel of Judges.
- A training session on the application and site visit preparation may be conducted by AQA at the applicant’s choice of location and time prior to application submittal. Any charges for this session are the responsibility of the applicant.
- AQA will coordinate the application process and ensure the examiner team is properly constituted.
- AQA will deliver an electronic copy of the Feedback Report to the applicant’s Contact person at the conclusion of the application process.



# 2010 Intent to Apply and Eligibility Form

1. The applicant is applying for:
  - Showcase in Excellence Award & Name of Process \_\_\_\_\_
  - SQA - Large Organization (more than 500 employees)
  - SQA - Medium Organization (100-499 employees)
  - SQA - Small Organization (1-99 employees)
  
2. Which of the following weeks is the applicant's **preferred** week for site visit. If both weeks are acceptable, please check both weeks. *Note: Site visits for Showcase in Excellence will not exceed 4 hours. Site visit duration for SQA will not exceed 5 days but is dependent on initial review of the application.*
  - Week of September 27 – October 1, 2010** (Your "preferred" week is not guaranteed.)
  - Week of October 4 – 8, 2010**
  
3. Organization name (include parent and subsidiary names if applicable):  
\_\_\_\_\_
  
4. Organization address (headquarters address or location applying for award): (w/city,state,zip)  
\_\_\_\_\_
  
5. Contact person (to be the liaison with AQA – they should understand the process being submitted):  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_
  
6. Contact person's telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_
  
7. Contact person's email address: \_\_\_\_\_
  
8. Name of CEO or President (provide name of person with closest approximate position, if different):  
\_\_\_\_\_
  
9. Quality/Performance Excellence Director (person with closest approximate responsibilities):  
\_\_\_\_\_

<p>10. Industry</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Computers/Technology</li> <li><input type="checkbox"/> Education</li> <li><input type="checkbox"/> Energy/Utilities</li> <li><input type="checkbox"/> Finance or Insurance</li> <li><input type="checkbox"/> Government or Nonprofit</li> <li><input type="checkbox"/> Healthcare</li> <li><input type="checkbox"/> Hospitality</li> <li><input type="checkbox"/> Manufacturing</li> <li><input type="checkbox"/> Professional/Commercial Services</li> <li><input type="checkbox"/> Real Estate/Construction</li> <li><input type="checkbox"/> Retail</li> <li><input type="checkbox"/> Telecommunications</li> <li><input type="checkbox"/> Wholesale Distribution</li> <li><input type="checkbox"/> Other (please specify)</li> </ul>	<p>11. Type of organization</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> For Profit</li> <li><input type="checkbox"/> Not for Profit (non-government)</li> <li><input type="checkbox"/> Government</li> </ul> <p>12. Number of full-time employees</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> 2-19</td> <td><input type="checkbox"/> 20-49</td> <td><input type="checkbox"/> 50-99</td> </tr> <tr> <td><input type="checkbox"/> 100-249</td> <td><input type="checkbox"/> 250-499</td> <td><input type="checkbox"/> 500+</td> </tr> </table> <p>13. Number of part-time employees</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Zero</td> <td><input type="checkbox"/> 1-19</td> <td><input type="checkbox"/> 20-49</td> </tr> <tr> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-249</td> <td><input type="checkbox"/> 250-499</td> </tr> <tr> <td><input type="checkbox"/> 500+</td> <td></td> <td></td> </tr> </table> <p>14. % of employees in Arizona _____%</p>	<input type="checkbox"/> 2-19	<input type="checkbox"/> 20-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-249	<input type="checkbox"/> 250-499	<input type="checkbox"/> 500+	<input type="checkbox"/> Zero	<input type="checkbox"/> 1-19	<input type="checkbox"/> 20-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-249	<input type="checkbox"/> 250-499	<input type="checkbox"/> 500+		
<input type="checkbox"/> 2-19	<input type="checkbox"/> 20-49	<input type="checkbox"/> 50-99														
<input type="checkbox"/> 100-249	<input type="checkbox"/> 250-499	<input type="checkbox"/> 500+														
<input type="checkbox"/> Zero	<input type="checkbox"/> 1-19	<input type="checkbox"/> 20-49														
<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-249	<input type="checkbox"/> 250-499														
<input type="checkbox"/> 500+																

15. Percent physical assets in Arizona \_\_\_\_\_%

16. Applicant existed for at least one year?  Yes  No

17. Organization headquartered in Arizona?  Yes  No

18. Is the organization a subsidiary of a larger organization?  Yes  No

19. If applicant answered "Yes" to being a subsidiary, complete the following:

a. Parent Organization \_\_\_\_\_

b. Address \_\_\_\_\_

c. Highest Official of Parent Organization \_\_\_\_\_

d. Title \_\_\_\_\_

e. Does Applicant comprise over 50% of parent organization?  Yes  No

20. Confidentiality Considerations:

a. Applicant waives the right to bring suit against the Arizona Quality Alliance.  Accept  Decline

b. Shaw Resources is the owner of the Scorebook Navigator™, the software used for the Performance Excellence Program applications. The Alliance for Performance Excellence distributes this software to state quality organizations.

c. Applicant waives the right to bring suit against the Alliance for Performance Excellence and/or Shaw Resources, their licensees, agents, or assigns and releases the Alliance and/or Shaw Resources, their licensees, agents, or assigns from any claims, action, or losses arising from use of the Scorebook Navigator™ software in conjunction with evaluating the document submitted by the Applicant.  
 Accept  Decline

**Confidentiality Note:** Strict conflict of interest rules apply throughout the processes. Names of applicants, individual applications, commentary, and scoring information developed during the review of the application are regarded as proprietary and are kept confidential. Such information is available only to those individuals directly involved in the evaluation and application distribution process. Information on successful strategies of Award recipients and other applicants may be released only with written approval of the applicant.

21. The applicant submits the following potential Examiner candidates:

Potential Examiner: \_\_\_\_\_ Email: \_\_\_\_\_

Potential Examiner: \_\_\_\_\_ Email: \_\_\_\_\_

Potential Examiner: \_\_\_\_\_ Email: \_\_\_\_\_

Potential Examiner: \_\_\_\_\_ Email: \_\_\_\_\_

**Note:**

*(AQA will send the Potential Examiner(s) an Examiner Application if requested, or it can be found at [www.arizona-excellence.com](http://www.arizona-excellence.com) under AQA Awards on the left side of the home page.)*

## Release Statement

We agree to all terms stated above and attest to the validity and truth of all information we have provided. We understand that by applying for the Arizona Performance Excellence Program, we accept all the requirements of the Arizona Performance Excellence Program process. The application fee is non-refundable. We agree to host a site visit and to facilitate an open and unbiased examination. We understand that our organization must reimburse the Arizona Quality Alliance (AQA) for reasonable costs and expenses associated with a site visit and the team of examiners.

The AQA may request additional information concerning our organization if issues are identified that could affect the credibility and valuation of the Awards. This information must be supplied, if requested, to the AQA. We agree to make AQA aware upon inquiry of any current or pending regulatory, criminal, or civil action that could damage the reputation of the Arizona Performance Excellence Program process.

If our organization is selected to receive an Award, we agree to share non-proprietary information on our successful performance and quality strategies with other Arizona organizations. This includes participation in Conferences or other events sponsored by AQA. By applying for the Awards, the applicant agrees to provide to AQA an electronic copy of the original application edited for general public consumption. The applicant also agrees to allow AQA to use this edited application as well as the organization's name as a recipient of the Awards in educational, marketing and promotional materials for the Awards program and the AQA.

\_\_\_\_\_  
Signature, Contact Person of Applicant

\_\_\_\_\_  
Title

Date \_\_\_\_\_

\_\_\_\_\_  
Signature, Other Official if required by Applicant

\_\_\_\_\_  
Title

Date \_\_\_\_\_

Please print a copy of this agreement, sign where indicated and mail the original form and a minimum of 50% of the application fee to AQA.

**Send agreement and payment to:**  
Arizona Quality Alliance  
8655 E. Via de Ventura, Suite E185  
Scottsdale, Arizona 85258-3360