WHAT IS THE BEVERLY HILLS COMMUNITY HEALTH AND SAFETY RECOGNITION PROGRAM?
The City of Beverly Hills is made up of dedicated individuals, residents, businesses and organizations that serve the City of Beverly Hills Community and contribute to the wellbeing of the City. To recognize individuals, residents, businesses or organizations that have made significant efforts towards fulfilling the mission of the Health and Safety Commission in Beverly Hills, the Commission has created the Beverly Hills Community Health and Safety Recognition Program. The Commission will recognize those who have gone above and beyond in their dedication and service to health, safety and disaster preparedness. The Mission of the Health and Safety Commission is to strive to maintain and improve the overall health and safety of the Community.

PROGRAM EVALUATION CRITERIA:
The program recognizes an individual, resident, business, or group who have significantly improved the Community in the areas of health, safety and/or disaster preparedness.

WHO IS ELIGIBLE FOR NOMINATION?
To be eligible, the nominee must have made a positive impact on our City in the areas of health, safety and/or disaster preparedness.

WHO CAN MAKE A NOMINATION? HOW ARE AWARD SELECTIONS MADE?
Nominations can be made by anyone, and will be evaluated by Health and Safety Commissioners. The Commission will consider the criteria above as a part of their review process and award selection.

WHEN WILL RECOGNITION OCCUR?
Individuals, groups, residents, or businesses will be notified by the City and acknowledged at the Health and Safety Commission monthly meeting.
BEVERLY HILLS COMMUNITY HEALTH AND SAFETY RECOGNITION PROGRAM

NOMINATION FORM

Nominee’s Name:_______________________________________________________

Nominee’s Address:______________________________________________________________________________

Nominee’s Phone Number: ___________________  E-Mail: ______________

Please briefly describe the achievements of the nominee and explain why you feel this individual, business or group’s efforts have significantly improved community health, safety and/or emergency preparedness in Beverly Hills. Provide specific examples using the criteria on the reverse side of this form. Attach additional sheets if needed. All information provided is subject to verification.

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Nomination submitted by (print your name): ___________________________________

Your Address: __________________________________________________________

Your Phone Number: _______________  E-Mail: ______________

Please submit your nomination form to the City of Beverly Hills
Office of Emergency Management
On-line: www.beverlyhills.org/hsawards
Mail to:  455 North Rexford Dr, Beverly Hills, CA 90210
E-Mail to:  pmoffice@beverlyhills.org
Fax: 310-247-1953
For additional information please call
Adrianne Tarazon at 310-285-1080