



**MBE COORDINATOR OF THE YEAR
Award Questionnaire**

Congratulations on being nominated for the "2007 Coordinator of the Year Award" by the Florida National Minority Supplier Development Council, Inc. To help the award selection committee to do an impartial evaluation it is hereby requested that you write in comments for all of the questions asked below. The information is for the period **January 1, 2007 to December 31, 2007**. The information you provide will be kept strictly confidential and the form will be destroyed after the award is made. **Please return the completed form by May 30, 2008.**

Corporation Name: _____

CEO or COO Name: _____

Title: _____

Phone _____ Fax _____ Email _____

Name of MBE Coordinator: _____

Title: _____

Phone _____ Fax _____ Email _____

Please fill in the blanks and/or answer all of the following:

1. \$ _____ Total corporate dollars awarded to MBEs for goods and services during the reporting period. This was a _____ % increase or _____ % decrease from last year's total.
2. \$ _____ Total dollars your company awarded to FMSDC MBE members during the reporting period.
3. \$ _____ Total corporate purchasing dollars your company awarded to FMSDC MBE certified suppliers.
4. Does your company accept FMSDC Certification? (Circle one) **Yes** **No**
5. Does your company require FMSDC Certification? (Circle one) **Yes** **No**
6. If the answer to question 5 is no, what efforts have you made to have your company require FMSDC Certification.
7. Indicate the total number of MBEs your company did business with during this reporting period:

8. Does your company have an established MBE program:
(Circle one) **Yes** **No**
If yes, please submit a copy of your a) MBE program and b) Policy and Procedures along with this questionnaire.
Your MBE program began in what year: _____.

FLORIDA MINORITY SUPPLIER DEVELOPMENT COUNCIL, INC.
6880 Lake Ellenor Drive • Suite 104A • Orlando, FL 32809
(407) 245-6062 • Fax (407) 857-8647 • e-mail: Stephanie@fmsdc.org • www.fmsdc.org

9. Does your company provide purchasing personnel with incentives or recognition for purchasing from MBEs?

(Circle one) **Yes** **No**

If yes, please explain your program and if no please explain why not:

10. Did your company:

a. Have a Corporate Booth at the NMSDC Trade Fair held last October 2007?

(Circle one) **Yes** **No**

Did your company support the Trade Fair in any other manner?

(Circle one) **Yes** **No**

Please explain "yes" response to the question regarding "other support provided":

b. Have a Corporate Booth at the FMSDC Trade Fair held last August 2007?

(Circle one) **Yes** **No**

Did your company support the Trade Fair in any other manner?

(Circle one) **Yes** **No**

Please explain "yes" response to the question regarding "other support provided":

c. Have a Mini-Trade Fair for MBEs during the reporting period?

(Circle one) **Yes** **No**

If yes, attach a copy of the announcement and participants.

11. Did your company sponsor any FMSDC activities during the period?

(Circle one) **Yes** **No**

If yes, please list the activities and the types of sponsorship:

12. List other activities or in-kind contributions your company made in support of the NMSDC, such as conducting/providing training to MBEs, doing referrals, doing site visit/survey, etc., please explain:

13. Did your company provide scholarships or educational advancement for MBEs:

(Circle one) **Yes** **No**

If yes, please describe, and list how many MBEs have participated in such programs during the reporting period:

14. List other activities your company has been involved in that supports minority business development:

YOU MAY submit additional material and documentation to support responses to the above questions and this nomination. You may use additional sheets of paper to complete your responses. Visual Aids are acceptable but PLEASE DO NOT SUBMIT AUDIO VISUAL AIDS.

Please Note: The data entered above should include data for ethnic minorities only.

I, _____ certify that the above information is true and correct to the best of my knowledge.

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Signature _____ Date: _____

Title: _____

Small Business Liaison/Minority Business Coordinator Signature: _____

Date: _____

Thank you for completing this survey for the "Coordinator of the Year" award and congratulations on being nominated.
We Wish You the Best.

Malik Ali
President

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