

CIO100

SYMPOSIUM & AWARDS CEREMONY

NOMINATION FORM

Please use this form to draft responses for your CIO 100 submission.

All submissions must be made using the online portal found on cio100.com. No PDF submissions will be accepted.

Do you work for the organization you are nominating? *

- Yes
 No

If no, please indicate your relationship with the organization you are nominating. *

- We are a public relations firm and are nominating our client
 We are a technology solutions provider/partner and are nominating our customer Other; please specify: ____

Is the organization you are nominating aware they are being nominated? *

- Yes
 No

Person at the nominated organization who has authorized this application (name, title, contact information) If self, please indicate. *

First Name* _____
Last Name* _____
Title* _____
Phone* _____
Email* _____

Person submitting this application:

First Name* _____
Last Name* _____
Title* _____
Company* _____
Phone* _____
Email* _____

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Part 1: The Nominated Organization

The Nominated Organization

Name of Nominated Organization* _____

Headquarters Address* _____

Address 2 _____

City* _____

State/Province* _____

Postal Code* _____

Country* _____

Website* _____

Is the nominated organization a division or subsidiary of a larger company? *

Yes

No

The nominated organization is a (select one): *

Public company

Private company

Non-profit

Government organization

Which primary industry or market does the nominated organization serve (select one) *

Aerospace or Defense Contractor

Agriculture

Business or Management Services (including Consulting)

Computer Hardware

Computer Software Education

Financial Services (e.g. Banking, broker and Dealers, Exchanges)

Government, Federal (including Military)

Government, State or Local (including Law Enforcement)

Healthcare (e.g. Medical Services, Pharmaceutical, Biotech)

Hospitality, Travel & Leisure

Insurance Legal Manufacturing

Media (e.g. Publishing, Broadcasting, Advertising or PR)

Mining, Oil or Gas

Nonprofit

Real Estate

Retail, Wholesale or Distribution

Sports & Entertainment

Telecommunications

Transportation

Utilities (Oil, Water, Gas, Electric)

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Brief description of the organization (you may include your company mission statement or other information that summarizes your company's products or services). * (500 word limit)

Company Size

Total number of employees in nominated organization. *

Fiscal year 2019 revenue (as reported to the SEC, if available; otherwise, please provide an estimate of 2018 revenue). If your organization is a government agency or nonprofit, please provide your organization's total budget for 2019. If your company reports its revenue in non-U.S. currency, please convert figures to U.S. dollars: *

Executive Information

CIO: Provide the name of the top IT executive for the nominated organization or its parent company; please do not list project managers or IT managers who are not heads of IT):

First Name* _____

Last Name* _____

Title* _____

Street Address* _____

City* _____

State/Province* _____

Postal Code* _____

Country* _____

Phone* _____

Email* _____

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If applicable, please provide the CIO's administrative assistant's contact information.

First Name _____

Last Name _____

Phone _____

Email _____

CEO: List the top executive for the nominated organization or its parent company: First Name _____

Last Name _____

If applicable, please provide the CEO's administrative assistant's contact information.

First Name _____

Last Name _____

Title _____

Email _____

If applicable, please provide the PR contact for the nominated organization.

First Name _____

Last Name _____

Title _____

Phone _____

Email _____

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Part 2: Your Project

Please be specific, and use supporting data and whatever metrics are appropriate. The most successful applications are those that provide narrative examples or anecdotes about the initiative and its impact on the business. That might be how employees work differently as a result of the project, or how customers interact with your company in new ways, or what kind of impact the initiative is having in your market. Project summaries must include enough specific detail to give the judges a clear picture of the innovation and business value delivered.

Project Name: _____

Give us an executive summary of your project.

In 100 words or less, how would you describe it to your board of directors or to senior business colleagues? *

Briefly describe how your project works and its business purpose.

In bullet points, tell us what it is, what it does and when it began. Focus your answer on the specific initiative you are submitting for consideration. (Do NOT describe the project's innovation or business results here; we'll ask for that in the next questions.)

What is innovative about your project?

The innovation may be based on the use of a new technology or a new way of using existing technologies. Please limit your response to a 500-word narrative*

Summarize the most innovative aspects of your project:

Include three bullets with a 25-word limit for each.

-
-
-

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What are the specific business results generated by your project?

Please elaborate with as much specific detail as necessary about the measurable business benefits and provide evidence and data to back up your claims (e.g., detailed ROI for financial value, proof of increased market share, number of new customers gained, percentage of customers retained or additional revenue generated). Please limit your response to a 500-word narrative*

Summarize the specific business results generated by your project:

Include three bullets with a 25-word limit for each.

-
-
-

Please describe the team and the cross-departmental collaboration involved in executing your project. Please limit your response to 250 words. *

Which business department primarily benefits from this project? (You may select more than one if appropriate, but no more than three. Hold the 'CTRL' key while making your selection.) *

- Accounting & Finance
- Asset Management or Maintenance
- Customer Service or Support Engineering
- Human Resources IT
- Inventory Management
- Manufacturing Marketing
- Order Processing or Fulfillment
- Research & Development
- Sales
- Supply Chain or Logistics
- Other, please specify: _____

What is the primary business goal of the project? *

- Competitive Advantage
- Customer Experience
- Financial impact
- Globalization
- Operational Impact
- Regulatory Compliance
- Security & Risk Management
- Strategic Impact Supply Chain Impact
- Other, please specify: _____

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Which technologies have been most important to executing the project? (You may select up to three.) *

- Business Intelligence or Data Analytics
- Business Process Management
- Cloud Computing Services or Software as a Service (SaaS)
- Collaboration Tools
- Content or Document Management
- Customer Service or Customer Relationship Management (CRM)
- Databases or Data Warehouse
- Development Tools/Platforms
- Enterprise Architecture
- Enterprise Resource Planning (ERP)
- Marketing Automation
- Mobile or Wireless
- Security Technologies (e.g. data loss prevention, encryption, identity management)
- Supply Chain or Logistics
- Virtualization
- Other, please specify: _____

Please list the top three vendors whose products are most important to your project:

Vendor 1* _____
Vendor 2 _____
Vendor 3 _____

Is your project a product or a service that is sold to outside organizations? *

- Yes
- No
- If Yes, please explain* _____

How much money did you invest in the project? (Please state all figures in U.S. dollars) *

Can this figure be published?

- Yes
- No

Which of the following best describes the current status of your project (select one)? *

- Deployed partially
- Deployed fully

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What is the time frame for the full payoff of the project (select one)? *

- 1-6 months
- 7-12 months
- 13-24 months
- 25-36 months
- More than 3 years

Project Executive Information

Project Lead: Please provide details about the nominated organization's senior-most project executive who championed this project.

First Name* _____
Last Name* _____
Title* _____
Street Address* _____
City* _____
State/Province* _____
Postal Code* _____
Country* _____
Phone* _____
Email* _____

If applicable, please provide the Project Lead's administrative assistant's contact information.

First Name _____
Last Name _____
Phone _____
Email _____

If there is any information from this nomination that should remain confidential, please note here:

By submitting this nomination, I acknowledge that the information it contains is accurate, that the appropriate parties at the nominated organization are aware of the nomination and its contents, and the nominated organization is able and willing to accept the award if chosen by the panel of judges