

# New Mexico Quality Awards INTENT TO APPLY and ELIGIBILITY FORM

Review instructions starting on page 10. Type or clearly print all information. This **Intent to Apply form** and the **non-refundable fee** must be physically present in the Quality New Mexico office by **5:00pm April 22, 2011 (Cycle I) or June 3, 2011 (Cycle II)**. A copy of the approved form will be returned. Include a copy of the approved form with each copy of your application.

**1. APPLICANT ORGANIZATION:**

\_\_\_\_\_  
 Organization Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City, State, Zip Code

**2. OFFICIAL CONTACT:**

\_\_\_\_\_  
 Title (Mr., Mrs., Ms., Dr., etc.) and Name

\_\_\_\_\_  
 Mailing Address (if different from above)

\_\_\_\_\_  
 City, State, Zip Code

\_\_\_\_\_  
 Telephone Number                      Fax Number

E-mail Address: \_\_\_\_\_

**3. APPLYING FOR:**

- Piñon Recognition (refer to Piñon Criteria)
- Roadrunner Recognition (refer to Baldrige Criteria)
- Zia Award (refer to Baldrige Criteria)
- Feedback Only (subunit Zia eligibility)

**4. APPLYING USING THE:**

- Business/Government/Non-Profit Criteria
- Education Criteria
- Health Care Criteria

**5. NATURE AND SIZE OF ORGANIZATION**

<b><u>Business</u></b>	<b><u>Education</u></b>	<b><u>Government</u></b>	<b><u>Health Care</u></b>
<input type="radio"/> Profit	<input type="radio"/> K-12	<input type="radio"/> City/County	<input type="radio"/> Profit
<input type="radio"/> Non-Profit	<input type="radio"/> 12+	<input type="radio"/> State	<input type="radio"/> Non-Profit
	<input type="radio"/> Profit	<input type="radio"/> Federal	
	<input type="radio"/> Non-Profit	<input type="radio"/> Tribal	

Number of Full-Time (or Equivalent) Employees \_\_\_\_\_

**6. PREVIOUS HISTORY WITH THE NMQA:**

Year	Applied for	Received
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**7. PARENT ORGANIZATION / SUBUNITS:**

Is your organization a subunit                       Yes     No  
 Is parent organization in New Mexico     Yes     No  
 See Page 7 for recognition eligibility requirements

Location of parent organization: \_\_\_\_\_

**8. CEO or HIGHEST RANKING OFFICIAL IN NEW MEXICO:**

\_\_\_\_\_  
 Title (Mr., Mrs., Ms., Dr., etc.) and Name

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 City, State, Zip Code

\_\_\_\_\_  
 Telephone Number                      Fax Number

E-mail Address: \_\_\_\_\_

"I understand that our application will be reviewed by members of the Board of Examiners. Should our organization be selected for a site visit, we agree to host the site visit, facilitate an open and unbiased examination, and pay the reasonable costs associated with a site visit. The NMQA may publicize the name of our organization in relation to awards process events, status, and results if we are selected as an award or recognition recipient."

\_\_\_\_\_  
 Signature: Highest Ranking Official                      Date

**9. MAIL or DELIVER THIS FORM AND THE APPLICABLE ELIGIBILITY DETERMINATION FEE (\$200) TO:**

**Mailing Address:**  
 Quality New Mexico  
 P.O. Box 25005  
 Albuquerque, NM 87125

**Physical Address:**  
 Quality New Mexico  
 8205 Spain, NE Suite 111  
 Albuquerque, NM 87109

**Or FAX WITH PURCHASE ORDER # to:**  
**(505) 944-2002**

**13. For use by Quality New Mexico only:**  
 Applicant is eligible to apply at the level specified in Item 3:     YES     NO     FEEDBACK ONLY

\_\_\_\_\_  
 NMQA Authorizing Official                      Date

# INTENT TO APPLY and ELIGIBILITY FORM continued

**Applicant Name** \_\_\_\_\_

## 10. AUTHORIZATION FOR ELECTRONIC DISTRIBUTION OF APPLICATION

Our organization has elected to submit our application via CD/PDF format. We authorize the NMQA Director to transmit our application over the internet to the selected reviewers from the Board of Examiners, which includes the technical editors and judges.

\_\_\_\_\_  
Signature: Official Contact Person

\_\_\_\_\_  
Date

**11. APPLICATION CYCLE (Circle One):**

**CYCLE I**

**CYCLE II**

## 12. ADDITIONAL INFORMATION

# INTENT TO APPLY FORM INSTRUCTIONS

## GENERAL INSTRUCTIONS

Applicants planning to apply must submit Intent to Apply Form to Quality New Mexico by 5:00pm April 22, 2011 (for Cycle I) or June 3, 2011 (for Cycle II).

A non-refundable fee is due with the Intent to Apply form for all award/recognition levels.

**NOTE:**

Applicants must submit a copy of the approved Intent to Apply Form with each copy (10 copies or one copy with CD) of the application.

The application is due July 22, 2011 (Cycle I) or October 21, 2011 (Cycle II).

## ITEM INSTRUCTIONS

### 1. Applicant Organization

Provide the official name and mailing address of the organization applying for an award or recognition. The official name is the name of the organization as you would like it to appear on certificates, award objects, in publicity releases, etc.

### 2. Official Contact

As the examination proceeds, the NMQA Director may need to contact the applicant for additional information.

Give the title, name, mailing address, telephone, fax number, and email of the person who has the authority to speak for the organization, to provide additional information, and arrange a site visit or post-examination meeting, if required.

If the official contact person changes during the application process, notify the NMQA Director.

### 3. Level of Application

Check the award/recognition level and sector for which the organization is applying.

**NOTE:**

**ORGANIZATIONS THAT HAVE RECEIVED RECOGNITION IN THE PAST MUST APPLY AT THE NEXT HIGHER LEVEL.**

### 4. Applicable Criteria

Check the appropriate *Criteria* the organization is using to conduct its self-assessment and prepare its application.

► By reading the various *Criteria*, it will likely become clear which *Criteria* version (Business, Education, Health Care) is more aligned with your organization and more beneficial to use.

### 5. Nature and Size of Organization:

► Check the boxes that most clearly describe the nature of your organization.

► Enter the number of employees in the organization at the time the Intent to Apply Form is submitted. If volunteers are a significant part of your organization, volunteer time may be used in computing the number of full-time-equivalent employees.

**NOTE:**

**At least five full-time (or equivalent) employees are required for an organization to be eligible for the New Mexico Quality Awards.**

### 6. Previous History with the NMQA:

If the organization has applied for NMQA recognition in the past indicate:

- the year of application
- award or recognition level applied for
- and award or recognition received

### 7. Parent Organization and Subunits:

Subunits of New Mexico organizations may participate at any level – see eligibility requirements Page 7 (if previous recognition must apply at next higher level). Complete this section if applicable including the location of the parent organization.

### 8. CEO or Highest Ranking Official in New Mexico:

Indicate the title, name, address, telephone, fax number, and email of the organization's CEO or highest-ranking official in New Mexico.

► SIGNATURE OF THE CEO OR HIGHEST RANKING OFFICIAL IN NEW MEXICO IS REQUIRED

By signing the statement the official agrees: that members of the NMQA Board of Examiners, the Panel of Judges, and other individuals with a specific "need to know" may be authorized access to the application materials;

- 1) that should the organization receive an award or recognition, QNM can publicize the applicant's name in connection with the awards process;
- 2) that the organization will support a site visit, if requested to do so by the Panel of Judges;
- 3) that the organization will comply with the terms and conditions of the New Mexico Quality Awards; and
- 4) that if recognized at any level, the organization may include this information in marketing materials only if such materials reflect the correct level of award or recognition conveyed, the year it was received, and the correct recognition logo.

The signature also affirms that if the applicant is a sub-unit of a parent organization, the signing official has a clear understanding of the organization and certifies that the applying sub-unit functions relatively independently of the parent organization (see page 7 for details).

#### **9. Mailing or Faxing Instructions:**

Intent to Apply forms received after the deadline will only be considered for eligibility and acceptance subject to the availability of sufficient Examiners to review the applications.

Late submissions may be rejected and returned without action.

#### **10. Application CD/PDF and Authorization to Release Via Internet**

Application may be submitted CD/PDF or paper format. If submitted CD/PDF applicant must sign the authorization in this section. Along with the CD, submit one paper copy of application and approved Intent To Apply.

#### **11. Application Cycle**

Circle the appropriate Cycle for your application, feedback report, and notification. Cycle I applications are due July 22 and Cycle II applications are due

October 21. See page 22 for other important dates.

#### **12. Additional Information**

Use this section to provide additional information.

#### **13. Eligibility Determination for a 2011 NMQA**

This section is for use by Quality New Mexico only.

The NMQA Director will return a copy of the processed NMQA Intent to Apply form after it is approved.

If eligible, the applicant must include a copy of the form in each of the ten copies of its application (one copy with CD).