

2019 PiPEX Award for Performance Excellence

Intent to Apply Form

PiPEX Award for Performance Excellence, 50-page Application	
Intent to Apply with processing fee (see below) submitted to PiPEX by	May 10, 2019
Application fee due to PiPEX by	June 28, 2019
Application submitted to PiPEX by	July 26, 2019
Site Visit	Early October
Award Recipient(s) Announcement	Early 2020
Feedback report sent to applicant	Early 2020
Feedback report meeting	Early 2020
Level 1 applications are accepted year-round (Elite and Premium members can submit Level 2 and 3 applications year-round)	
Intent to Apply with processing fee (see below) submitted to PiPEX	2-months before submitting app.
Application fee due to PiPEX	1-month before submitting app.
Site Visit (excludes application for Commitment) at	Mutually agreeable time
Feedback report sent to applicant within	6-months of submitting app.

Congratulations! By applying to the PiPEX Award for Performance Excellence Program, you are taking a major step to improve your organization's performance and growth. Because of the learning inherent in completing an 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.

Application Costs:

PiPEX Awards	Number of Workers*	Processing Fee	Application Fee Corporate Non-Member	Application Fee Corporate Member
Excellence (Level 4) <i>50-pages + Org. Profile</i>	Fewer than 100	\$1000	\$7,500	\$2,000 discount for Premium, \$4,000 discount for Elite
	100 - 499	\$1000	\$8,000	
	500+	\$1000	\$9,000	
Proficiency (Level 3) <i>35-pages + Org Profile</i>	Fewer than 100	\$750	\$6,000	\$2,000 discount for Premium, \$4,000 discount for Elite
	100 - 499	\$750	\$6,500	
	500+	\$750	\$7,500	
Achievement (Level 2) <i>25-pages + Org. Profile</i>	Fewer than 100	\$500	\$5,000	\$2,000 discount for Premium, \$4,000 discount for Elite
	100 - 499	\$500	\$5,500	
	500+	\$500	\$6,500	
Commitment (Level 1) <i>5-page Org. Profile</i>	Same for all sizes	none	\$3,000	\$2,500
Process Level	NA	none	\$3,000	\$2,500
Category Level	NA	none	\$3,000	\$2,500

* "Workers" are all people working in or for the organization – not just paid, full-time staff.

In addition, PiPEX will invoice applicants for site visit costs to reimburse travel and lodging for the examiner team.

- Site visit costs include examiner team's hotel accommodations, food, transportation, conference room when necessary, etc.
- Site visits will not exceed 5 days, but the actual duration will be determined by the examiner team's review of the application and size of the organization.

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Additional Requirements

Because having internal knowledge of the Criteria framework is critical to advancing excellence within your organization, and to support PiPEX's Program, it is necessary that each applicant provide or sponsor at least one examiner (preferably two) per application submitted or increase each application fee by \$500.

(NOTE: Please contact PiPEX if you have questions or concerns, or if you are unable to provide an examiner.)

Fill in blank cells as appropriate: [E-Mail completed form to jordan@partnerspex.org](mailto:jordan@partnerspex.org)

Application Level

Check Intended Application Level 1 2 3 4 or

Single Process One Process Category

Check Criteria being used Business Healthcare Education

1. Applicant Information

Legal Company Name:

DBA Name (if any):

Prior Company Name:

Prior Award App Years:

Address of Organization:

Building/Park:

Street, Suite:

City, State,
Zip:

2. Highest-Ranking Official

Name:

Title:

Phone:

E-Mail:

Address – (if other than listed above):

Building/Park:

Street, Suite:

City, State,
Zip:

3. Applicant Contact Person

Name:

Title:

Phone:

E-Mail:

Address – (if other than listed above)

Building/Park:

Street, Suite:

City, State,
Zip:

4. Award Category and For-Profit/Nonprofit Designation (check boxes as appropriate)

For-Profit:

Not-for-Profit:

Education:

Health Care:

Service:

Small Business:

Manufacturing:

Government:

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5. Applicant Status (check box as appropriate)

How long as the applicant been legally registered with the Secretary of State?

a. Is the applicant up-to-date in paying all municipal, state, or federal taxes?	N/A	YES	NO
b. Are there any present liens placed against the applicant?		YES	NO
c. Has the applicant had any layoffs within the past 365 days of this application date?		YES	NO
d. Does the applicant have any layoffs planned within the next 12 months from this application date?		YES	NO
e. Is the applicant or any of its officers the subject of any criminal investigations, the defendant in any criminal cases?		YES	NO
f. Is the applicant the defendant in or subject of any civil litigation other than minor contractual disputes?		YES	NO
g. Has any officer in the applicant's organization been subject to professional discipline such as the suspension, revocation, payment of a fine or settlement or other discipline by a public or private licensing or certification body?		YES	NO

Please explain "No" response to a. and all "Yes" responses to b. – g. as appropriate:

6. Size and Location of Applicant

Total count - full-time workers:
(including physicians whether or not they are paid directly by the organization)
Total count - volunteer:

Total count -part-time workers:
Total count third-party temps:

For the preceding fiscal year, check **one** financial descriptor and range:

Sales:		Revenues:		Budgets:	
0–\$1M:	\$1M–\$10M:	\$10M–\$100M:	\$100M–\$500M:	\$500M–\$1B:	More than \$1B:

Number of Sites in New England:
Percentage of Employees:

Sites Outside NE, but in US:
Percentage of Employees:

Sites Outside of US:
Percentage of Employees:

Operational practices associated with all major organizational functions must be accessible for examination. If some activities are performed outside the applicant's organization (e.g., by a component of the applicant that is outside New England, the parent organization, or its other subunits), will the applicant make available sufficient personnel, documentation, and facilities to allow full examination of its operational practices for all major functions of its worldwide operations?

Yes:
No:
N/A:

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7. Subunits (complete as applicable)

Is the applicant _____ a larger parent or system? (Check all that apply.)

A subsidiary of:

Administered by:

A school of:

A division of:

A unit of:

An agency of:

Controlled by

Owned by:

A bureau of:

Department of

Name of Parent (or System) Organization:

Briefly describe the major functions provided to the applicant by the parent or by other subunits of the parent.

Examples of such functions include, but are not limited to, strategic planning, business acquisition, research and development, data gathering and analysis, human resource services, legal services, finance or accounting, sales/marketing, supply chain management, global expansion, information and knowledge management, education/training programs, information systems and technology services, curriculum and instruction, and academic program coordination/ development.

Briefly describe the organizational structure and management links (relationship) to the parent.

8. Site Listing and Descriptors

Site Location	Relative Size – Percent of Applicant’s (include both)		Describe Products, Services or Programs
	Employees	Sales	

9. Key Business/Organization

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List, briefly describe, or identify the following key business/organization factors. Be as specific as possible to help the Program avoid real or perceived conflicts of interest when assigning Examiners to evaluate your application. "Key" means those organizations that constitute 5 percent or more of your competitors, customers/users, or suppliers/partners.

Description of the applicant's main products and/or services and of the major markets served (local, regional, national, or international)	
List major markets served:	
List of top three key competitors	
List of to three key customers/users	
List of top three key suppliers:	
Name of financial auditor	Fiscal Year (start/end)

10. Supplemental Attachments - Please Attach the Following Documents as applicable

Attach a line-and-box organization chart for the applicant that includes the **division or unit level**. In each box, include the name of the unit or division and the name of its leader.

Attach a line-and-box organization chart(s) showing the relationship of the applicant to the highest management level of the parent, including all intervening levels. Each box within the chart should include the name of the leader of the unit or division.

If nonprofit, attach a copy of proof of your non-profit status.

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11. Eligibility Filing Fee

Provide payment for the **\$250** non-refundable eligibility filing fee:

Payment Options

If paying by check: please make check payable to Massachusetts Council for Quality, Inc. (dba Partners in Performance Excellence) and mail to:

Susan Rosati
Partners in Performance Excellence
P.O. Box 222
New Milford, CT 06776

If paying by Credit Card: please call our Bookkeeper Susan Rosati at 860.799.0188 to set up the charge.

12. Confidentiality Considerations

Applicant waives the right to bring suit against PiPEX, from any claims, actions, or losses arising from the Award for Performance Excellence Process.

Accept:

Decline:

Confidentiality Note: Strict conflict of interest rules apply to PiPEX 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.

13. Self-Certification Statement, Signature of the Highest-Ranking Official

We agree to all terms stated above and attest that

- (1) I have reviewed the information provided by my organization in this Eligibility Certification Package.
- (2) To the best of my knowledge,
 - no untrue statement of a material fact is contained in this Eligibility Certification Package, and
 - no omission of a material fact has been made in this package.
- (3) Based on the information herein and the current eligibility requirements for the PiPEX Award and Recognition Program, my organization is eligible to apply.
- (4) I understand that at any time during the 2016 Examination and Award Process cycle, if the information is found not to support eligibility, my organization will no longer receive consideration for the Award and will receive only a feedback report.
- (5) We agree to host a site visit and to facilitate an open and unbiased examination. We understand that our organization must reimburse PiPEX for reasonable costs and expenses associated with a site visit and team of examiners. Additionally, we understand that our organization must provide at least one examiner to support the program.
- (6) PiPEX may request additional information concerning our organization if issues are identified that could affect the credibility and valuation of the PiPEX Award Program. This information must be supplied, if requested, to the PiPEX. We agree to make PiPEX aware upon inquiry of any current or pending regulatory, criminal, or civil action that could damage the reputation of the Partners in Performance Excellence Program process.
- (7) 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 interested organizations. This includes participation in Conferences or other events sponsored by PiPEX
- (8) By applying for the Award, the applicant agrees to provide 15 paper copies of the application and an electronic copy and allow PiPEX to share said application electronically with its Board

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of Examiners and Judges.

Print Name:		Title:	
Signature:		Date:	