

Best Companies Group

Best Places to Work in Hawaii

Company Participation Registration Form

REGISTRATION DEADLINE: October 1, 2010

Please complete the following information and submit this form by October 1st. Once Best Companies Group receives this form, you will be sent a confirmation email with detailed information about the survey process.

Company Name: _____
(Name as it should appear in print)

Legal Name of the Company: _____
(If different than listed above)

Federal Employer Identification Number (FEIN): _____

Mailing Address: _____

City: _____ **County:** _____

State: _____ **Zip Code:** _____

Company Web Site URL: _____

Industry: (Please select all the apply.)

- | | | |
|-----------------------------------------------|------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Hospitals/Healthcare | <input type="checkbox"/> Banking/Finance | <input type="checkbox"/> Professional Services |
| <input type="checkbox"/> Commercial Services | <input type="checkbox"/> Technology | <input type="checkbox"/> Non-Profits |
| <input type="checkbox"/> Hospitality/Hotels | <input type="checkbox"/> Restaurants | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Small Business | <input type="checkbox"/> Family owned | <input type="checkbox"/> Construction and Contracting |

Primary Contact (This person will be the main contact for questions throughout the entire process and the recipient of all communications (via emails and letters), employee surveys for distribution, reports, etc.)

Name: _____

Title: _____

Mailing Address: _____

City: _____

State: _____ **Zip Code:** _____

Direct Dial Phone Number: _____
(No home or cell phones please)

Fax Number: _____

Email Address: _____

Secondary Contact (This person will be the contact for questions if the primary contact is unavailable.)

Name: _____

Title: _____

Direct Dial Phone Number: _____

Email Address: _____

CEO, President, Manager, Etc. (Highest-ranking position in the city of the nominated workplace.)

Name: _____

Title: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Direct Dial Phone Number: _____

Email Address: _____

Start Here!

Best Companies Group Registration Information

Thank you for your interest in participating in the 2011 Best Places to Work in Hawaii program. Registration is simple, however we encourage you to read the participation information carefully before submitting your registration form.

To participate, all companies begin by filling out and submitting a registration form and faxing it to 717-236-6803.

Registration Deadline: October 1, 2010

Once the registration information is received by Best Companies Group, companies will receive a confirmation email (which will include additional instructions). Participation is free unless you need for us to administer the survey via traditional paper surveys (fees are printing, shipping and processing of the surveys). The fee is based upon the size of the company.

Number of Employees	# Employees Surveyed	Online Fee(1)	Paper Fee(1)
15 - 24 (2)	All	FREE	\$105
25 - 99	All	FREE	\$240
100 - 199	All	FREE	\$370
200 - 499	Up to 250 (3)	FREE	\$445
500 - 2499	350 (3)	FREE	\$535
2500 +	400 (3)	FREE	\$685

- Online Survey** (Electronic) **Paper Survey** (Hard Copy)

(1) Fees are non-refundable.
(2) To ensure the credibility of the information, companies with 15-24 employees must have an 80% (or better) response rate to be considered for the list.
(3) Employees are randomly selected.

Upon completion of the assessment process, all participating companies will receive the Employer Benchmark Summary.

Additional reports are available for purchase. Please read the Report Options page on the Web site.

Once the registration is received, Best Companies Group will send the company (according to the timeline):

The Employer Benefits & Policies Questionnaire (employer questionnaire)

A set of Employee Engagement & Satisfaction Surveys (employee surveys)

Survey instructions

Other supporting information

IT Contact (This person will be the contact for any technical systems questions regarding online surveys - for all employer questionnaires and online surveys for employees - regarding filtering, spam content, white-listing, etc.)

Name: _____

Direct Dial Phone Number: _____

Fax Number: _____

Email Address: _____

PR/marketing Contact (This person will handle any marketing and/or public relations questions for your company.)

Name: _____

Title: _____

Direct Dial Phone Number: _____

Email Address: _____

Additional Company Information:

Total number of employees in Hawaii (EXCLUDING temporary/seasonal and per diem employees).

Total Employees: _____ Full-time Employees: _____ Part-time Employees: _____

Total number of employees in the United States (EXCLUDING temporary/seasonal and per diem employees).

Total US Employees: _____ Full-time US Employees: _____ Part-time US Employees: _____

Online Survey (Electronic) Paper Survey (Hard Copy)

Additional Survey Options

Does your company need surveys in another language? *

Spanish-Latin American Spanish-European French Chinese Japanese Other

* Best Companies Group has the ability to survey employees in additional languages. For a fee we can provide the employee survey in another language. If your company needs surveys in a language other than English, please check the box above and you will be contacted with additional information.

Is your company interested in customizing the job role and department category demographics on the employee survey? (There is a fee for customizations)

Name of person completing this registration form:

Name: _____

Title: _____

Email Address: _____

Are you authorized to enter your company into this process: YES NO

Commitment: By submitting this form, our company is entered into the "Best Places to Work in Hawaii" program. I am committing to meet all deadlines and complete both portions of the assessment process. If at any point we choose to withdraw from the process, we will notify a representative of Best Companies Group at 1-877-455-2159 immediately. Companies withdrawing after October 1, 2010 will incur a \$250 withdrawal fee in addition to the total fees incurred for any special requests (customization orders, language translations, paper survey processing, etc.).

Submit this registration form

by faxing it to 717-236-6803

Participation is Free: (For the online process)
Paper fees differ and are determined based upon the size of the company.

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How did you hear about the program?:

- HawaiiBusiness - Ad
- HawaiiBusiness - Email
- HI State Chamber - Email
- HI State Chamber - Newsletter
- Best Companies Group - Letter
- Best Companies Group - Email
- Best Companies Group - Phone call
- Direct mail piece
- Other-Please describe

Please be aware that as part of the "Best" program, a certain threshold of employee survey responses must be received in order for the analysts to consider the survey data valid. If a company does not meet this threshold, their full consideration for the "Best" list may be jeopardized, even resulting in elimination. In the rare case a company's response rate is extremely low, a statistically valid Employee Feedback Report (if purchased) will not be presented.

▶ IMPORTANT: If any of the contact information changes at any point in the process, please notify Megan Burns at meganb@bestcompaniesgroup.com immediately.

Best Companies Group▶▶▶

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