



National Small Business Week
SBA Form 3306
Small Business Prime Contractor of the Year

Instructions: Refer to the National Small Business Week Award Nominations Guidelines for detailed instructions for submitting nominations.

This form must be completed by a Federal agency official. The completed form must be submitted with the nomination package as noted in the award guidelines. Answer each question as fully as possible; if it is not applicable, state N/A.

1. Nominee Information:

- a. Name:

- b. Title:

- c. Business name:

- d. Business address:

- e. Business phone number:

- f. Business email address:

2. Nominator Information:

- a. Nominator name:

- b. Title:

c. Address:

d. Phone number:

e. Email address:

Answer each of the following questions in 200 words or less.

3. Provide a biography for the nominee(s):

4. Describe the nominee's business, including areas served:

Caution: Penalties for False Statements

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of program participation or other benefits awarded by the agency. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of not more than \$250,000, and under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000.

Paperwork Reduction Act Notice:

SBA will use the information collected on this form, along with other information submitted by award nominees as part of the nomination package, to determine the nominee's eligibility for a particular small business award; to identify any actual or apparent conflict of interest and, to make eventual award determinations. Responding to this request for information is voluntary. However, failure to provide the requested information may affect SBA's ability to make a decision regarding your eligibility for an award.

You are not required to respond to any collection of information unless it displays a currently valid OMB control number (3245-0360). The estimated burden for completing this form is 1 hour and 15 minutes, including the time for reviewing the instructions, and gathering and compiling data. Combined with the time for completing the Form 3300, the total estimated time to prepare and submit the nomination package for each nominee is 90 minutes. Comments on this burden estimate should be sent to the U.S. Small Business Administration, Chief, AIB 409 3rd St., SW, Washington, DC 20416, and Desk Officer for the U.S. Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, DC 20503. **DO NOT SEND COMPLETED FORMS TO OMB. Submit them to the location indicated in the nomination guide.**