



#We Are Sterling

Elevating organizational performance excellence.

2020-2021 Sterling Explorer Assessment Application of Intent

Please type and make a copy for your records.

- 1) **Applicant Organization (including Division Name) as you would want listed on the Feedback Report and recognition, as appropriate.**

Official Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

- 2) **Highest Ranking Official**

Name (Mr. Ms. Dr.): _____

Title: _____

Address: _____

Official Representative for Correspondence:

Name: _____ Title: _____

Telephone: _____ Fax: _____

Email Address: _____

- 3) **Level of Assessment**

We are applying for the Sterling Explorer Level of Assessment (please check box):

- 4) **Sector Category (please check one)**

Manufacturing

Service

Education

Health Care

Nonprofit/Govt.



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5) Size and Location of Applicant

Number of sites included in the application: _____

Total of Full-Time employees for the application: _____

Statement of Authorization

We understand this Application of Intent Form and subsequent Sterling Collaborative Assessment Profile will be reviewed by the Sterling office and members of the Board of Examiners. We agree to host an assessment process on a virtual platform. We plan to submit our Explorer Assessment Organizational Profile within 60 days of the Application of Intent.

Authorized Signature _____ Name (Printed) _____

_____ Date _____

Title

_____ Telephone Number

Checklist

- _____ Application of Intent filled in completely and signed.
- _____ Application of Intent processing fee of \$1,000 attached (*non-refundable*) **The Florida Sterling Council**

Is a line or box organization chart included which shows all components of the Applicant organization?

Yes No

If the Applicant is a subunit of a larger organization:

Are the line and box organization charts included which show the relationship of the Applicant to the highest management level of the parent organization, including all intervening levels? Yes No