

## How To Apply

Examiner Applications are available in January each year. To obtain an application please complete the response card in this brochure or call CAPE at 858.486.0400. You may also download an examiner application at [www.caexcellence.org](http://www.caexcellence.org).



CCE/CAPE  
PO Box 1235  
Poway, CA 92074

U.S. Postage  
Necessary  
If Mailed In The  
United States

The California Awards for Performance Excellence™ (CAPE™) program offers your organization three stages of assessment and feedback. They are:

- ☆ The California Challenge
- ☆ The California Prospector
- ☆ The Eureka Award & U.S. Senate Productivity Award

Any private or public sector entity doing business in California with 10 or more employees is eligible to apply. Each Award tier uses the most current criteria from the Malcolm Baldrige National Quality Award program (MBNQA).

### CAPE

P.O. Box 1235  
Poway, CA 92074-1235  
Phone: (858) 486-0400  
Fax: (858) 486-8595  
[www.caexcellence.org](http://www.caexcellence.org)



California Awards for Performance Excellence™

# Seeking Applicants for the Board of Examiners



[www.caexcellence.org](http://www.caexcellence.org)

## Benefits of Being An Examiner

### Individual Benefits

- strengthen your ability to use the Criteria for Performance Excellence for organizational assessment
- network with peers and enhance your own professional growth
- review applications from leading organizations across California
- possibly participate in site visit reviews of the highest scoring applicants
- write feedback reports to applicants

### Organizational Benefits

Examiners receive valuable training and experience in understanding and applying the Criteria to a variety of organizations, including businesses and education and health care organizations. They develop analytical and consensus-building skills and a systems perspective that can be applied to their home organizations.

## Role of Board of Examiners

**Examiners** and **Senior Examiners** review, comment on, and score written applications. Selected Examiners participate in consensus evaluations and site visits that are led by Senior Examiners, and some prepare feedback reports to applicants.

**Judges** review Examiner scores, select applicants for and site visits, and make Award recommendations. The Judges rely on Examiner and Senior Examiner reports during their reviews.

## Commitment

Examiners contribute significant time to the California Awards for Performance Excellence™ - ten days or more a year. The actual commitment depends on the number of applications reviewed and whether the Examiner participated in a site visit.

Attendance at a three day Examiner Participation Course, in June or July, is required for all new Examiners. The Award's critical review periods are: mid-August through September for independent review, late September through October for consensus review, and late October for site visits.

Review of written applications is carried out at the Examiner's work location or home. Travel is necessary only for training and site visits.

## Becoming An Examiner

Examiners are selected by the CAPE™ Council on a competitive basis. Factors considered in selection are:

- expertise in business, manufacturing, non-profit, government, education, military or health care management, processes, and results
- knowledge of practices and improvement strategies leading to performance excellence
- length, breadth, and types of experience
- written and verbal communication skills
- leadership and interpersonal skills
- education and training
- achievements and recognition
- sector coverage and balance for the entire Board

## Key Dates

- ★ **January**  
Examiner Application Available
- ★ **April**  
Educational Conference & Awards Ceremony
- ★ **June/July**  
Examiner Training
- ★ **August**  
CAPE™ Applications Due early August
- ★ **October**  
CAPE™ Application site visit
- ★ **December**  
Winners announced

Please send me the following information:

- Examiner Application (Available in January)
- Criteria for Performance Excellence
- Business  Education  Health Care
- Please put me on future mailing lists

Name \_\_\_\_\_

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Telephone \_\_\_\_\_

ZIP \_\_\_\_\_

E-Mail \_\_\_\_\_