



CALL FOR ENTRIES

2017 IIDA Gateway Chapter Interior Design Excellence Awards

IMPORTANT UPCOMING DUE DATES

Entry Form and Project Submittals **Monday, July 31st by 5:00p.m.**

(Please email Cate Pedley at catepedley@gmail.com with intent to submit)

ELIGIBILITY

Submitting firms must practice within the Gateway Chapter Region although projects may be located outside of the Regional Chapter area. Projects completed as of January 2014 to June 2017 will be eligible. Each entry must recognize all firms and individuals involved in the design process. Note it is the responsibility of the entrants to give proper credit for joint ventures.

CATEGORIES

Civic & Government	Corporate Small (under 10,000sq ft)	Corporate Large(over 10,00sq ft)
K-12 / Early Childhood	Higher Education / Research	Healthcare Small(under 25,000sq ft)
Healthcare Medium(25,000-100,000sq ft)	Healthcare Large(over 100,000sq ft)	Senior Living
Multi-Family	Renovation/Historic Preservation	Hospitality / Restaurant
Retail	Sports & Recreation	Branding & Communication

ENTRY FEES

Entry fees are per category and per individual project entered

\$150.00 IIDA Member First Entry	\$200.00 Non-IIDA Member First Entry
\$50.00 IIDA Member Additional Entry	\$100.00 Non-IIDA Member Additional Entry

JUDGING PROCESS

A panel of three IIDA Professional Members from outside the Gateway Chapter will review entries and select winners based on established criteria. Judges have discretion over which category the project is placed. Judges will recognize the top (3) in each category with the award going to 1st Place. Judges decisions are final. Honorable mentions may also be given based on Judges discretion.

For Questions Please Contact

Cate Pedley, Associate IIDA, VP of Programs

catepedley@gmail.com

314-593-4694



Confidential Entry Form

2017 IIDA Gateway Chapter IDEA Design Competition

Project Information:

Project Name: _____

Project Owner: _____

Project Location: _____

Completion Date: _____

Project Square Footage: _____

Individual Responsible for Submission:

Contact Name: _____

Category: _____

Design Firm: _____

Telephone: _____

Email: _____

Entry Fees:

____ \$150.00 IIDA Member First Entry

____ \$200.00 Non-IIDA Member First Entry

____ \$50.00 IIDA Member Additional Entry

____ \$100.00 Non-IIDA Member Additional Entry

Total Enclosed: \$ _____ Please make checks payable to IIDA Gateway Chapter

Send completed form by Monday, July 31st to lrichie@wspaces.com and check to:

Working Spaces, 11624 Page Service Drive, St. Louis, MO 63146 ATTN: Larry Richie

Disclaimer:

I understand the rules of this competition. I understand there are no refunds for entry fees and my projects materials are property of IIDA and will not be returned. I understand the jury reserves the right to select a winner from the entries submitted for these competitions from each category but not limited to awarding projects in each category. I confirm that this entry meets eligibility requirements. I certify that permission has been obtained from the owner(s) for the photographs as well as to publish the project and photographs. I have reviewed the information above to be accurate and complete for possible publication. I verify that the entry is entirely the work of those listed.

Signature: _____

Date: _____



IDEA COMPETITION GUIDELINES AND SUBMITTAL PACKET

2017 IIDA Gateway Chapter IDEA Design Competition

Dear Entrant:

IIDA Gateway Chapter is pleased to enclose your official submittal packet for the Interior Design Excellence Awards (IDEA) Design Competition. The object of this design competition is to recognize excellence and continue to build public awareness in the field of Interior Design in our region of the Midwest. The competition has the following categories:

- Civic & Government
- Corporate Small (Under 10,000 SF)
- Corporate Large (Over 10,000 SF)
- K-12 or Early Childhood Education
- Higher Education / Research
- Healthcare Small (Under 25,000 SF)
- Healthcare Medium (25,000 SF – 100,000 SF)
- Healthcare Large (Over 100,000 SF)
- Senior Living
- Multi-Family
- Renovation or Historic Preservation
- Hospitality and Restaurant
- Retail
- Sports & Recreation
- Branding & Communication

All entries will be judged by a panel of IIDA Professional Members outside of the IIDA Gateway Chapter. The images, floorplans and project descriptions will be used to judge the entries. Individual projects may be recognized independently of the above categories at the discretion of the judges.

Entry Requirements:

1. The designer or design firm entrant must be within St. Louis Metro or Southern Illinois.
2. The project can be from anywhere in the world.
3. The project must be completed between January 2014 and June 2017.

Deadlines:

All submittals must be received via email no later than **5:00 pm on Monday, July 31st, 2017**

PLEASE SEND ENTRIES TO CATEPEDLEY@GMAIL.COM

Awards:

Awards will be given to the firm with the best project submittal in each category per the judge's scoring.

In addition, Honorable Mention(s) Awards may be given in some of the categories.

Awards Presentation:

The winning entries will be announced and awards presented at the IIDA Gateway Chapter IDEA Awards Ceremony on **Friday, October 6th, 2017**. All entries will be shown at the event, however, only the winners will be part of the audio-visual presentation.

Winners will not be announced prior to the awards ceremony. However, we will let you know if you've been nominated in the top 3.

Details regarding Sponsorship Opportunities, Tickets and Venue will follow.

General Instructions:

This submittal packet is formatted to provide all information necessary to begin production of the awards announcement, audio-visual presentation and editorial coverage immediately following the judging. Please note that the material you submit will determine the quality of the way your work is presented in subsequent audio-visual and press coverage.

1. Complete all pages in their entirety and provide all information as requested.
2. Each page of the submittal packet must be labeled with the Project Identification Number (PIN) at the top of each page.
3. Please type all information in Arial 12pt
4. The entrant(s) are responsible for the accuracy of all information provided on the Identification Form and elsewhere in the packet.
5. Please remember that all entries become the property of IIDA Gateway Chapter upon submission.

Presentation Requirements:

All submitted items will be put into a PowerPoint presentation by the IDEA committee. At the awards ceremony the presentation will be projected onto screens. BE ADVISED resolution and formatting is essential.

Project Statement: All electronic submissions in editable formats, no pdfs

1. Indicate the design challenges of your project, including the client's objective.
2. Identify the specific solutions to these challenges, noting originality, suitability of design to the project challenges, successful incorporation of interior finishes/furnishings and benefits to the client.

Visual Submissions:

1. One (1) black and white floor plan 8.5 x 11 pdf in a medium to high resolution format. Remove all title block information and be sure there is NO other identifying or distinguishing marks or information, including firm name or logo.
2. Up to two (2) black and white drawings/sketches of high quality may also be submitted.
3. One (1) colored rendering/perspective of medium to high quality may also be submitted.
4. A minimum of three (3) and up to five (5) images. Please include a description of each photograph indicating the room/area location. (.jpg format and under 1MB per .jpg is preferred)

CONFIDENTIAL

Project Identification Number: _____

(NOTE: We will send you the project PIN numbers upon confirmation of your entry)

Project Statement Form:

Submission Category: _____

Project Completion Date: _____

In 500 words or less, describe the project entry. No specific references to the names of designer(s), owner(s), other parties involved, or the geographic location of the installation should be included in this statement. The details should be focused to the description of the design problem and how it was solved. Any elements to support the design concept and application should also be included.

CONFIDENTIAL

Project Identification Number: _____

2017 IIDA Gateway Chapter IDEA Design Competition

Interior Design Firm:

Name: _____

Street Address: _____

City, State, Zip: _____

Day Phone #: _____

Primary Contact: _____

Primary Contact Email: _____

Interior Design Team:

IIDA Gateway Member Name: _____

Name: _____

Name: _____

Name: _____

Name: _____

Architect:

Name: _____

Street Address: _____

City, State, Zip: _____

Day Phone #: _____

Email: _____

CONFIDENTIAL

Project Identification Number: _____

2017 IIDA Gateway Chapter IDEA Design Competition

Project Owner/Client: (will not be contacted)

Name: _____

Contact Person: _____

Title: _____

Street Address: _____

City, State, Zip: _____

Installation Location: (If different from above)

Street Address: _____

City, State, Zip: _____

Photographer:

Name: _____

Contact Person: _____

Street Address: _____

City, State, Zip: _____

Day Phone #: _____

CONFIDENTIAL

Project Identification Number: _____

2017 IIDA Gateway Chapter IDEA Design Competition

Should an entry receive an award or be included in any publication, credits will be taken from the Concealed Identification Form. Since there will be no further verification of the information supplied on the form, accuracy is essential. By submitting an entry, each entrant agrees that all information supplied on this form is correct and complete. The entrant is solely responsible for any errors or omissions in the information supplied on this form. The entrant will be the official contact for this competition and shall receive all correspondence and communication from the Chapter.

In signing this form, the entrant verifies that this project was completed between the dates of January 2014 – June 2017. IIDA Gateway Chapter must rely on the integrity of the entrant(s) for verification of this information. The entrant(s) further verifies that he or she is the designer of this installation and had lawful right to so state. The entrant further verifies that written permission has been obtained from the Owner(s) and Photographer(s). Copies of written permission must be available upon request from IIDA Gateway Chapter to publish the photographs.

Name of the Project/ Category: _____

Entrant: _____

[Name of person submitting form]

IIDA Member Name: _____

IIDA Member No #: _____

Firm Name: _____

Signature: _____ Date: _____