

Mental Health Champion Nomination Form



PART 1: Who Are You Nominating?

Contact Information for your Mental Health Champion Nominee(s):

Name(s):

Title(s):

Organization(s):

Mailing Address(es):

Phone Number(s):

Email Address(es):

Contact Information for Nominator:

Name:

Title:

Organization:

Mailing Address:

Phone Number:

E-mail Address:

Relationship of Nominee to You (e.g., *colleague, employee, friend*):

PART 2: Describe the person you are nominating for a VHCF Mental Health Champion Award in no more than 400 words. Use the following questions as a guide and add any other information that would help the judges understand, specifically, what makes your nominee special. Specific examples and/or results are very helpful.

- Provide relevant information about your nominee's personal and/or professional background.
- What makes your nominee extraordinary and a Mental Health Champion. How has s/he gone "beyond the call" to improve the mental health and well-being of his/her patients/clients, colleagues, and/or community? What has occurred as a result?
- Share thoughts or testimonials of those impacted by the nominee's extra efforts and of colleagues, community leaders or others with direct experience or knowledge of the nominee's noteworthy work.
- Include any additional information that will help the judges understand why your nominee is exceptional.

Thank you for helping us highlight the remarkable nature and work occurring in Virginia during these times of high mental duress! Please **submit this by February 23rd to MentalHealthChampion@vhcf.org**.

Please remember to submit the nomination following Arial 12 pt., double-spaced formatting