

“Exceptional Individual/Parent Award”

2017 Nomination Form



Please HELP US:

To acknowledge VBH members’ journeys in the behavioral health system, Value Behavioral Health of Pennsylvania, Inc. (VBH-PA) will publicly acknowledge HealthChoices members from Crawford, Mercer and Venango Counties who have demonstrated courage, creativity and leadership in their journey. Two awards from each county will be given. One VBH member will receive an award for Adult Services and the other award will be given to a Family Member(s) or Caregiver of a VBH Child or Adolescent who has received Children Services.

An acknowledgement in the form of a beautifully designed plaque that will be customized and presented during the luncheon on November 9, 2017 at the **10th Annual “Acknowledging the Journey” VBH Member Forum at the Park Inn by Radisson, 3377 New Castle Road (Rt. 18) in West Middlesex, PA.** VBH-PA respects and values the efforts of our HealthChoices members. The purpose of the “Exceptional Individual/Parent Award” is to acknowledge members who are actively engaged in their journey and to encourage other members in theirs. **Hope, Success, Wellness and Recovery will be the underlying theme of the “Acknowledging the Journey” Member Forum.**

Please nominate at least one HealthChoices member residing in one of the NW3 counties (Crawford, Mercer or Venango) whom you feel is deserving of this type of recognition. **Please write as much of this person’s story as possible. Your information will be used by the NW3 Member Forum Workgroup to select award winners as well as in the remarks made to announce the person being honored.** Our award ceremony is more enjoyable if the remarks include some personal touches or stories that are inspiring to those in the audience. Attach additional pages if you wish. Thank you for taking the time to assist us in this exciting event.

The deadline to nominate is Friday, October 13, 2017*

You may type your own information on a separate sheet to nominate as long as each of the sections listed within this form are answered in your nomination submission. You may also use additional sheets to this nomination form if you run out of space. **YOU ARE ENCOURAGED TO RE-NOMINATE SOMEONE WHOM YOU MAY HAVE NOMINATED IN PAST YEARS HOWEVER THEY DID “NOT” RECEIVE THE EXCEPTIONAL AWARD.**

Nominee Information (please print or type- must be a VBH-PA member)

Crawford County nomination Mercer County nomination Venango County nomination

Adult Services nomination _____ **OR** **Family Member of Children Services nomination** _____

Nominee Name: _____

Address: _____ City: _____

Zip Code: _____ Telephone Number: _____ Email address: _____

****If this is a Family Member nomination, please provide the name and birth date of the HealthChoices (Value Behavioral Health) child/adolescent.**

Child/Adolescent Name: _____ Date of Birth: _____

Person Submitting the Nomination: _____

Address: _____ City: _____

Zip Code: _____ Telephone Number: _____ Email Address: _____

COUNTY AND TYPE (Adult or Family) OF NOMINATION: _____

How do you know this nominee? _____

What makes this person worthy of receiving the “Exceptional Adult Individual/Parent Caregiver Award”? Please provide examples of ways this nominee has overcome challenges and contributed to their or to their child’s success.

How has this nominee demonstrated resiliency throughout their journey or their child’s journey?

(Please use additional sheets as necessary)

How has this nominee’s journey given hope and inspired others? (i.e., other children, families, peers, Mental Health Association, Drop-In Centers, Church, Salvation Army, etc.), if not included within the narrative above.

THANK YOU FOR TAKING THE TIME TO “ACKNOWLEDGE THE JOURNEY!”

Please return this information to Shelley Thomas, PE&O Coordinator at shelley.thomas@beaconhealthoptions.com (preferred). Or mail to VBH Hermitage Office, 1485 North Hermitage Road, Hermitage, PA 16148 or FAX Form to 855-439-2448.

If you have any questions, please email Shelley Thomas at email above or call her at 724-962-8032.

DEADLINE TO NOMINATE IS FRIDAY OCTOBER 13, 2017*

*If you need extra time to submit your nomination please contact Shelley at the email or # above.