



2017 Children's Mental Health Awards

A COMMUNITY RECOGNITION PROGRAM

The Center for School Behavioral Health at Mental Health America of Greater Houston is now accepting submissions for our **2017 Children's Mental Health Awards**.

We encourage nominations of individuals, groups, organizations, associations, faith communities or providers whose contributions represent efforts in children's mental health and non-mental health related fields, areas of work or expertise and/or serves young people of any age, especially those with mental health conditions from around the Greater Houston area. The Greater Houston area encompasses Harris, Fort Bend, Montgomery, Brazoria, Galveston, Liberty, Waller, Chambers, and Austin counties.

While we accept all nominations, we are most interested in recognizing those who are seldom- and/or under-recognized for integrating children's mental health into their work or lives.

Nominees should have made significant contributions to raise children's mental health awareness through education and/or advocacy; taken steps to promote respect and provide support for children living with mental health concerns or social emotional disorders; informed the public about children's mental health and mental illness to help combat stigma; and/or engaged and encouraged our communities to embrace children's mental health as an important part of their overall health.

CRITERIA—Nominees must meet at least one of the following criteria to be eligible for an award.

- An individual or organization that uses unique or innovative strategies/initiatives to promote mental health and wellness and combat stigma of mental illness
- An individual or organization that has, through their efforts, specifically advocated for and/or impacted an individual and/or family living with mental illness
- An individual or organization that has taken action to enact change within their own field of endeavor and/or amongst their peers
- An individual or organization that has committed to the issue of mental health stigma and mental health awareness, and that promotes respect and support for those living with mental illness

CATEGORIES—Nominees may represent, but are not limited to, the following categories:

- Ethnic/Cultural/Underserved Populations
 - Workforce/Business
 - Health Care/Wellness Organization
 - Education (K-12, University/College)
 - Faith Community
 - Family/Youth Organizations
 - Men’s Groups/Organizations
 - Women’s Groups/Organizations
 - Community Focused Organization
 - Sports/Athletic Organization/Individual
 - Service Animals
 - Arts/Fine Arts
 - Media
- (Note: Awards may not be given in every category)*

NOMINATIONS—To nominate an individual or organization that has been stellar in their efforts please let us know by providing the following:

- Nominee's full name
- Organizational affiliation(s) and website (if applicable)
- Address, phone number and email address
- Supporting documentation (articles, photos, video, audio, etc.)
- Rationale/reason for the nomination (350-500 words)
- Name of nominator
- Nominator’s address, phone number and email address

Submit nominations and any supporting documentation in person, by mail, email or fax to:

Mental Health America of Greater Houston
Children’s Mental Health Awards - 2017
2211 Norfolk, Suite 810
Houston, Texas 77098

Email: tpatterson@mhahouston.org

Fax: 713-522-0698

Nominations must be postmarked or received by Saturday, March 18, 2017.

Recipients notified by April 21st.

Awards presented on Children’s Mental Health Day, May 4th at The Health Museum Houston

For more information, please contact

Traci Patterson, Director of Communications at tpatterson@mhahouston.org





CENTER FOR | **MENTAL HEALTH AMERICA
OF GREATER HOUSTON**
SCHOOL BEHAVIORAL HEALTH

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NOMINATION FORM**

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Children's Mental Health Awards - 2017
2211 Norfolk, Suite 810, Houston, Texas 77098

Email: Traci Patterson, tpatterson@mhahouston.org or Fax: 713-522-0698



About the Nominee

Nominee's Name: _____

Organizational Affiliation(s): _____

Website (If Applicable): _____

Address: _____

Phone Number: _____

Email: _____

Supporting Documentation (Attach up to 2 - Articles, Photos, Video, Audio, etc.-Submissions will not be returned):

Rationale/Reason for the Nomination (use additional page if necessary):

www.mhahouston.org

About the Nominator

Nominator's Name: _____

Address: _____

Phone Number: _____

Email: _____

** If this nominee is selected, Mental Health America of Greater Houston will notify you by email or phone of their acceptance.*