

The **2015** MaMHCA Awards

Each year MaMHCA recognizes outstanding contributions to our profession by an LMHC member, a mental health agency/organization that supports LMHCs, and a mental health counselor educator through our award program. ***We invite our MaMHCA members to make nominations for these awards in the categories below.*** The awards will be presented at the MaMHCA Annual Conference this Fall.

The Award Categories:

- ***Mental Health Counselor of the Year***
- ***Mental Health Counselor Educator of the Year***
- ***Mental Health Agency of the Year***

In addition, MaMHCA recognizes outstanding ***Graduate Student(s)*** as the recipient of the Haberman-Williams MaMHCA Scholarship.

We encourage all members of MaMHCA to nominate MaMHCA members for the individual awards and to nominate an agency with positive policies in support of LMHCs.

MaMHCA wishes to acknowledge all mental health counselors who perform above and beyond our professional code of ethics.

General Nomination/Selection Procedures

1. All nominators and nominees must be current members of MaMHCA.
2. All nomination submissions must be received by **September 30, 2015** and should be sent to the MaMHCA Awards Committee:
MaMHCA Awards Committee
17 Cocasset Street
Foxboro, MA 02035
3. Nomination submissions must include the following:
 - a. A completed nomination form.
 - b. A letter on the nomination (no longer than 2 pages) from the nominator that speaks directly to the nominee's qualifications for the award.
 - c. At least one letter of support from other individuals.
 - d. The nominee's vitae.
 - e. A phone number and e-mail address where the nominator can be reached.
4. Specify on all materials the award for which the member is being nominated.

MENTAL HEALTH COUNSELOR OF THE YEAR

Purpose of the Award

The Mental Health Counselor of the Year Award is intended to be given to an LMHC who spends significant time in direct mental health counseling with clients and relevant consultation activities. This award is intended to recognize an individual who has provided outstanding mental health counseling service, including consultation, to the public in Massachusetts.

Procedure for Nomination

Any person who is a current member of MaMHCA may make a nomination. The letter of nomination should be clear and concise and contain specific documentation of the performance and/or activities supporting the nomination. This will facilitate the committee's selection process.

Criteria

1. The nominee should have a current, unrestricted LMHC license.
2. The nominee should have at least 2 years membership in MaMHCA, including the nomination & award year.
3. The criteria should include service to the mental health counseling profession:
 - a. Through direct client service, and
 - b. Bringing positive regard to the LMHC license and the field of mental health counseling through their direct service to clients.
4. Nominees may be private practitioners, or employed in agencies, institutions or colleges and universities, but the primary role must be that of direct service provider.
5. A nominator can only nominate one person annually.

MENTAL HEALTH AGENCY/ORGANIZATION OF THE YEAR

Purpose of the Award

The Mental Health Agency/Organization of the Year Award is intended to honor and recognize agencies/organizations that provide outstanding mental health service to consumers in Massachusetts through innovative service programs; and provide/demonstrate employee practices that create a positive work environment for mental health clinicians and which recognizes and supports the professionalism of LMHCs.

Procedure for Nomination

Any person who is a current member of MaMHCA may make a nomination. The letter of nomination should be clear and concise and contain specific documentation of the performance

and/or activities supporting the nomination. This will facilitate the committee's selection process.

Criteria

1. Agencies/Organizations may be nominated who have significantly impacted the public with new programming developed for consumers. Additionally, the agency has enhanced the mental health counseling profession through support for positive employee practices, and support of LMHC practice.
2. Agencies/Organizations may be nominated for time given on behalf of legislative/public policy or participating in legislative/public policy making at a local, state, regional or national level.
3. A nominator can only nominate one agency/organization annually.

COUNSELOR EDUCATOR OF THE YEAR

Purpose of the Award

The Counselor Educator Awards is intended to be given to persons who spend at least 50% of their time in academic pursuits; teaching, training, consulting, supervising, researching or program development. This award is intended to recognize outstanding and humanitarian service to graduate students and/or post-graduate students in one of the above categories.

Procedure for Nomination

Any person who is a current member of MaMHCA may make a nomination. The letter of nomination should be clear and concise and contain specific documentation of the performance and/or activities supporting the nomination. This will facilitate the committee's selection process.

Criteria

1. The nominee may qualify for this award by outstanding and innovative educational program development in the mental health counseling field.
2. The mentoring and encouraging of others to enter the field of mental health counseling shall be an important criteria for any nominee in this category.
3. Nominees may come from any educational level: university, community college or public schools; and continuing professional education. Supervision (within graduate training or Post-MA work experience) may also be considered an educational activity in this category.
4. Letters of support from current or past students/supervisees or mentees must be part of the nomination package for this award.

MAMHCA AWARDS NOMINATION FORM

(Please type or print clearly)

NAME OF NOMINEE: _____

MAMHCA MEMBER? YES [] NO [] NA IF AN AGENCY []

AWARD:

[] MENTAL HEALTH COUNSELOR OF THE YEAR
➤ CURRENT POSITION OR TITLE: _____

[] COUNSELOR EDUCATOR OF THE YEAR
➤ CURRENT POSITION OR TITLE: _____

[] MENTAL HEALTH AGENCY OF THE YEAR
➤ CHIEF EXECUTIVE: _____

BUSINESS ADDRESS: _____

CONTACT INFORMATION:

E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

NAME OF PERSON MAKING NOMINATION: _____

MAMHCA MEMBER? YES [] NO []

➤ CURRENT POSITION OR TITLE: _____

BUSINESS ADDRESS: _____

CONTACT INFORMATION:

E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

ADDITIONAL REQUIRED MATERIALS (please see General Guidelines page 1)

- A letter (no longer than 2 pages) from the nominator that speaks directly to the nominee's qualifications for the award
- The nominee's resume or professional vita
- At least one additional letter of support