

The **New** MaMHCA Awards

Each year MaMHCA will recognize 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. ***This year we are inviting our MaMHCA members to make nominations for these awards in the categories below.*** The awards will be presented at the MaMHCA Annual Conference each 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 will recognize an outstanding ***Graduate Student*** as the recipient of the newly inaugurated 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 CRITERIA & SELECTION PROCEDURES

1. All nominators and nominees must be current members of MaMHCA.
2. All nomination submissions must be received by **August 15**.
3. Nomination submissions must include the following:
 - a. A completed nomination form.
 - b. A letter on 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.
5. Mail packets to:

MaMHCA Awards Committee
17 Cocasset Street
Foxboro, MA 02035

MENTAL HEALTH COUNSELOR OF THE YEAR

Purpose of the Award

The Mental Health Counselor of the Year Award recognizes an individual who has provided outstanding mental health counseling service, including consultation, to the public in Massachusetts. The recipient has spent significant time in direct mental health counseling with clients and relevant consultation activities.

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 3 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.

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 professors/instructors 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
for: Mental Health Counselor or Counselor Educator of the Year

NAME OF THE AWARD: _____
(Please type or print clearly)

NAME OF NOMINEE: _____
MAMHCA MEMBER? YES [] NO [] NA []

NAME OF PERSON MAKING NOMINATION: _____
MAMHCA MEMBER? YES [] NO []

NOMINEE:
CURRENT POSITION OR TITLE: _____

BUSINESS ADDRESS: _____

CONTACT INFORMATION:
E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

HOME ADDRESS: _____

PERSON MAKING NOMINATION:
CURRENT POSITION OR TITLE: _____

BUSINESS ADDRESS: _____

CONTACT INFORMATION:
E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

HOME ADDRESS: _____

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 letter of support

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.

► Mental Health Agency of the Year Nomination Form is on next page.

MAMHCA AWARDS NOMINATION FORM
for: Mental Health Agency of the Year

NAME OF AGENCY NOMINEE: _____
(Please type or print clearly)

BUSINESS ADDRESS: _____

AGENCY CONTACT PERSON

CONTACT INFORMATION:

E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

NAME OF PERSON MAKING NOMINATION: _____

MAMHCA MEMBER? YES [] NO []

BUSINESS ADDRESS: _____

CONTACT INFORMATION:

E-MAIL ADDRESS: _____

OFFICE PHONE: () _____

HOME PHONE: () _____

CELL PHONE: () _____

HOME ADDRESS: _____

ADDITIONAL REQUIRED MATERIALS

- A brief description of the agency
- A letter (no longer than 2 pages) from the nominator that speaks directly to the agencies qualifications for the award (please see criteria above)