



# ACMH 2010 Annual Awards Nomination Form

ACMH seeks to recognize individuals who have demonstrated a unique commitment to children with emotional, behavioral, or mental health challenges and their families and those whose efforts have supported the mission of ACMH. We invite our membership to nominate outstanding individuals who embody the values of ACMH and promote family and youth involvement.

To nominate a special individual or organization/agency, complete and submit the form below by August 23, 2010. Be specific and include as much information as possible as to why the person(s) you are nominating should be selected. Additional information may be included on a separate sheet of paper as needed.

Awards will be given out at the ACMH/SOC Conference on Oct. 27, 2010 during the Evening Reception at the Radisson Hotel & Conference Center in Lansing, Michigan.

*(ACMH reserves the right not to present every award listed each year and to add special awards in categories not included when appropriate)*

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (day) \_\_\_\_\_ (evening) \_\_\_\_\_

I nominate \_\_\_\_\_

for the following award: (check only one please)

**Leadership Award** – *This award is given to an individual or agency/organization in recognition of outstanding efforts at the local or state level on behalf of children with mental health needs and their families.*

**Gail E. Lanphear Award** – *This award is given in recognition of a parent has met the challenges of parenting a child with serious mental health challenges through creativity, dedication and an unwavering belief in their family*

**Partnership Award** – *This award is given in recognition of a professional or agency/organization who works with or on behalf of children with mental health challenges and their families and has demonstrated an outstanding commitment to promoting family-driven, youth-guided values and the mission of ACMH.*

**Health Gallager Robinson Award** – *This is a memorial award given to a child/youth with a serious emotional disorder for a special project or activity such as art lessons, music lessons, etc.). Please include with your nomination the parent & child's names, the child's wish, and their phone number.*

Why the person I nominated should receive this award:

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To nominate more than one individual or agency, please photocopy this form – Thank you!