

Value Behavioral Health of Pennsylvania (VBH-PA)
Crawford, Mercer and Venango County (NW3)
“Exceptional Individual/Family Award”
2008 Nomination Forum



We need your help:

To acknowledge Value Behavioral Health of Pennsylvania, Inc. (VBH-PA) members' journey in the behavioral health system, 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 presented. One member will receive an award for Adult Services and the other will be a Family member(s) of a child or adolescent who has received Children Services.

This is not a cash award, but an acknowledgement in the form of a beautifully designed plaque that will be customized and presented during the luncheon on November 12, 2008 at the **“Acknowledging the Journey” VBH-PA Member Forum at the Radisson in West Middlesex, PA.** VBH-PA respects and values the efforts of our HealthChoices members. The purpose of the “Exceptional Individual/Family 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 underling 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**) who you feel is deserving of this type of recognition. **The deadline to nominate is October 29, 2008.** Please write as much as you can because your nomination will be used 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.

You may type your own information on a separate sheet to nominate as long each of these sections are answered in your nomination submission. You may also use additional sheets to this nomination form if you run out of space.

Nominee Information (please print or type): Crawford County nomination
(must be a VBH-PA Member) Mercer County nomination
 Venango County nomination

Adult Services nomination _____ **OR** Parent/Family of Children Services nomination _____

Nomination Member Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Telephone number: _____
Email Address (if used regularly): _____

Person Nominating Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____

Telephone number: _____

Email Address (if used regularly): _____

How do you know this nominee?

Examples of services/program that the nominee has been involved with (if known – not required if you do not know):

Why do you feel this person is worthy of receiving the “Exceptional Individual/Family Award”:

(use additional sheets as necessary)

How has this nominee positively impacted others (i.e., other children, families, peers, Mental Health Association, Drop-In Centers, Community at large – Literacy Council, Church, Red Cross, 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, VBH Hermitage Office, 1485 North Hermitage Road, Hermitage, PA 16148 or you may also email Shelley at shelley.thomas@valueoptions.com

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