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**PeerWorks 2024 Lighthouse Awards Nomination Form**

**Individual Award**

1. **Nominee Information**

Please ensure the nominee knows your intention to nominate them and reviews and signs this nomination. In respect of their privacy, we want to ensure they agree and consent to the collection and sharing of the nomination package, including supplementary letters of support, with the PeerWorks Awards Selection Committee.

Nominee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pronoun (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Name (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Number: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*□ I am aware of this nomination and approve the nominator collecting the documentation required to support it.*

*□ I understand that, if selected to receive this award:*

* *I will be invited to accept the award on April 30th in an in-person ceremony. PeerWorks will cover the costs of the most economical method of travel within Ontario and one night accommodation if required.*
* *I will be asked to approve a draft of the information that will be presented about me at the event and during associated public communications.*

Nominee Signature (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Note: to respect the nominee’s privacy, applications will not be read or considered unless all boxes above are checked, and the nominee signs this form.*

1. **Nominee Affiliatio**n

Organization Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominee’s Role: o Management o Staff o Volunteer o Member o Other\_\_\_\_\_\_\_\_\_\_\_

Please provide contact information for a staff member of the affiliated organization.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Nominator Information**

Nominator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Nomination (please choose only one category):**

o **Theresa Claxton-Wali Community Impact Award:**

We are honoured to announce the establishment of the Theresa Claxton-Wali Community Impact Award, a tribute to the enduring legacy of our beloved colleague and friend. This award, created in collaboration with the Krasman Centre, aims to recognize those exceptional individuals who embody the extraordinary qualities that defined Theresa Claxton-Wali's impactful career and contributions.

Award Description:

The Theresa Claxton-Wali Community Impact Award acknowledges individuals who have demonstrated an unwavering commitment to advocating for the rights and voices of individuals with lived experience with mental health and substance use challenges. This recognition honours individuals who have made noteworthy impacts on the Peer Support Movement, Consumer Survivor Initiatives, and the overall mental health and addiction sector in Ontario.

**Criteria – please check all that apply.**

o Advocate for Autonomy: The nominee demonstrates a steadfast commitment to upholding the rights and amplifying the voices of individuals navigating mental health and addiction challenges.

o Innovative Peer Support: The nominee spearheads creative approaches in the peer support space, fostering hope, facilitating recovery, and cultivating meaningful connections.

o Systemic Influence: The nominee exhibits a track record of positively reshaping the mainstream mental health and addiction sector by advocating for the inclusion of peer support services.

o **Peer of the Year:**

Our Peer of the Year Award goes to a peer worker who stands out for their dedication to improving mental health and addictions support. Through their compassionate and lived experience-informed work, the Peer of the Year uplifts community members, improves service delivery and amplifies the consumer's voice. Their work may include creating/leading new peer support programs, advocating against mental health and addiction stigma and discrimination, or working to transform existing practices within an organization. The Peer of the Year is a leader in their community (geographical, organizational, identity-based, etc.) and an inspiration to other peers.

**Criteria – please check all that apply.**

o Amplifies the voices of people with lived experience.

o Creates/leads new peer programs.

o Advocates against mental health and addictions stigma and discrimination

o Works to transform existing practices.

o Leader in their community

o **Unsung Hero:**

Our Unsung Hero Award goes to an individual who, through their tireless commitment and work, has shown excellence in their service and support around mental health and addictions. Often, these are members of organizations or communities who work hard to encourage and amplify other voices, shine a spotlight on the work of others and do behind-the-scenes work to keep peer support services running and peer support communities strong. While they may not be at the front and center of an organization, their work enormously impacts the community and people served. **This award is specifically intended for someone who not been recognized for their work in mental health and addictions.**

**Criteria – please check all that** **apply.**

o Has never won any mental health/addictions-related awards at the provincial level or beyond.

o Tireless commitment to supporting people with mental health and addictions.

o Shines the spotlight on the work of others.

o Engages in significant behind-the-scenes/underrecognized work to keep peer services running and peer communities strong.

o Enormous impact on their community and people serviced.

**o Pay It Forward**

The Pay It Forward Award celebrates allies who have faced significant life challenges and transformed their experiences into powerful advocacy for positive change.

In the realm of mental health, "paying it forward" takes on diverse forms. Nominees for this award mobilize their personal experiences to advocate for systemic improvements and better conditions. Whether using their journey to champion improved conditions for individuals' experiencing mental health and addiction/substance use challenges or advocating for more affordable housing and enhanced shelter conditions after overcoming homelessness, the nominees create a more compassionate and supportive environment for others. They demonstrate empathy towards their peers and inspire future generations to do the same, serving as beacons of hope for the future and enduring sources of inspiration.

**Criteria – please check all that apply.**

o Pays it forward through service, community organizing, and/or advocacy (above and beyond any assigned or paid role) to peers in mental health/addictions

1. **Why do you think your nominee deserves this award?**

Please attach a description of the nominee’s activities or efforts relevant to this application, along with any supporting information. Your description should capture each of the activities you have checked above. Please do not send the nominee’s entire resume or CV. Please ensure that the nominee consents to your intention to nominate before you collect this information, and that the nominee signs the nomination form.

1. **Letter of Support**

Please provide at least 1 letter to support the nomination.  The letter should be from someone benefiting from the work of the nominee or who has observed how the nominee has made an impact on an organization, individuals or in the community with specific examples.

Please send the nomination form and accompanying documentation **by April 1st, 2024,** to:

E-mail: [info@peerworks.ca](mailto:info@peerworks.ca)

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| Nomination Checklist  Completed applications will include the following:  o Nominee information and signature  o Nominee affiliation – if applicable  o Nominator information and signature  o Indication of award criteria met  o Description of nominee’s activities and reasons for deserving the award  o Letter of support #1 |

Incomplete applications or applications without the nominee’s signature will not be considered. The awarded nominee as well as their nominator will be notified by April 15th, 2024.