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**PeerWorks 2024 Lighthouse Awards Nomination Form**

**Organizational Award**

1. **Nominee Information**

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

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

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

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

The nominee is: o A PeerWorks member organization.

o An initiative run by peers/people with lived experience that is not a

PeerWorks member organization

o A mental health/addiction service that is not peer-run and not an

PeerWorks member organization

o A social service outside of mental health and addictions

o A private or public corporation

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

* *A representative will be invited to accept the award on* April 30th, 2024, at an in-person ceremony. *We understand that PeerWorks will cover the most economical method of travel within Ontario and accommodation, if applicable, for one night for your representative.*
* *We will be asked to approve a draft of the information that will be shared about our organization at the awards event and during associated public communications.*

Organization/program lead signature (required) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Nominator Information**

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

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

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

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

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

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

Criteria for Nomination:

* Single organizations and collaborations/partnerships between several organizations can be nominated for these awards.
* Individuals or organizations may nominate an organization in these categories if they are not a staff or board member of the nominated organization.

**o Innovator Award**

Even after over thirty years, we are consistently impressed by the originality and creativity in the Peer Support field. Our Innovators Award honours organizations with ingenuity and innovation in their peer-based work in the mental health and addictions sector.

This might include:

* innovating programs digitally (e.g., creating online meetings, discussion boards, Twitter threads, YouTube channels, and webinars);
* working to overcome digital barriers through revised service models or mental health initiatives (e.g., warm phone lines, care-package drop-offs, art initiatives, etc.);
* or building upon the learned experiences from serving communities during challenging times.

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

o Innovation in peer driven research or evaluation

o Innovation in peer leadership in system design & creation

o Innovation in peer delivered service

o Innovation in clinical service

o Innovation in funding for peer-driven services

o Innovation in public education or anti-stigma

o Innovation in digital service delivery

o Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**o Community Builders Award**

Our Community Builders Award recognizes allies who contribute significantly to fostering collaboration and embodying the values of peer support. This award goes to organizations instrumental in creating bridges and cultivating a sense of unity with a strong commitment to equity and social justice.

**Community builders, in the context of this award, are allies who actively engage in collaborative efforts to amplify the voices of those who have been marginalized.** They play a pivotal role in increasing the capacity for peer involvement in decision-making processes. The impactful work of community builders takes various forms: 

* They may forge connections across different organizations, sectors, neighbourhoods, regions, or identity/issue/social groups.
* They may facilitate the development of relationships and networks, creating more inclusive and resilient communities.
* They may enhance services, broaden access to support and information, and contribute to improving community well-being.
* They may work to reduce stigma and discrimination through their initiatives and advocacy efforts.

**Criteria – please check all that apply**

o Building bridges to create more inclusive and resilient communities

o Working across organizations, sectors, neighbourhoods, regions, or identity/issue/social groups

o Caring about equity and social justice

o Amplifying silenced voices

o Increasing capacity for peer-involvement in decision-making

o Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Why do you think your nominee is deserving of 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 in the criteria above (and can include more). Please ensure that the nominee is aware of 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 include information on how the organization made an impact for individuals and/or in the community 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.

This may be from someone who has benefitted from the organization.

Please send the nomination form and accompanying documentation **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 Nominator information and signature  o Indication of award criteria met  o Description of nominee’s activities and reasons for deserving the award  o Letter(s) of support |

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.**