



## 2018 Carol Caruso Mental Health Advocacy Award Nomination Form

**Deadline for nominations: Wednesday, Feb. 21**

Carol Caruso, a longtime and highly regarded mental health advocacy leader, passed away in January of 2017. The Carol Caruso Mental Health Advocacy Award has been established in her honor to create a legacy that continues to advance the advocacy movement that Carol led for many years.

Please nominate an individual that embodies the unique qualities of Carol Caruso. The nominee should:

- Exhibit leadership abilities and a passion for mental health
- Have a compassionate spirit and a desire to help others
- Champion improvements to the mental health system
- Promote acceptance and understanding as a way of life
- Believe that recovery is possible for those affected by mental illness
- Strive to eliminate stigma

The nominee can be an individual living with a mental illness, a family member or loved one, a mental health professional, or anyone who tries to improve the lives of those affected by mental illness. The nominee must live in Pennsylvania.

This is not a cash award but an acknowledgment in the form of a trophy and public recognition as an advocate who is part of NAMI’s advocacy movement to end stigma, to change society’s attitude, and to create a culture of knowledge and understanding about mental illness.

The deadline to nominate is Wednesday, Feb. 21, 2018. The award will be presented on March 12, 2018, at NAMI Keystone Pennsylvania’s annual Mental Health and Wellness Conference at the Best Western Premier, The Central Hotel and Conference Center in Harrisburg.

**To nominate someone, please complete this form (you may type your information on a separate sheet or use additional sheets if you run out of space) and include a bio of the individual.**

### Nominee Information

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

Organization/Affiliation (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Person Making the Nomination

Name and Title: \_\_\_\_\_

Organization/Affiliation (if applicable): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

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**Questions to be Answered by Nominator**

**How do you know this nominee?**

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**What makes this person a candidate to receive The Carol Caruso Mental Health Advocacy Award?**

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**How has he/she shown qualities of leadership, passion for mental health, and a desire to help others?**

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**What advocacy, educational, and/or anti-stigma activities has the nominee participated in?**

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**Additional information you would like to be considered:**

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**Please return this form and the nominee's bio to NAMI Keystone Pennsylvania by Feb. 21, 2018.**

**Email:** [info@namikeystonepa.org](mailto:info@namikeystonepa.org) **Fax:** (412) 366-3935

**Mail:** NAMI Keystone Pennsylvania  
105 Braunlich Drive, Suite 200  
Pittsburgh, PA 15237

For additional questions, call the NAMI Keystone Pennsylvania office: 412-366-3788.