

Heroes in the FightSM Nomination Form

Heroes in the FightSM is a recognition partnership program established by Eli Lilly and Company and sponsored by Lilly USA, LLC. This program celebrates dignity, courage, hope, and recovery in the ongoing treatment of persons with serious and persistent mental illness (SPMI) by recognizing “heroes” who provide care and support for persons with SPMI and their families.

This program is being implemented in Washington DC through a partnership with National Alliance on Mental Illness DC and with the involvement of the following other Washington DC non-profit mental health organizations:

- FamilyLinks Outreach Center
- Howard University Department of Psychiatry
- N Street Village
- Washington Psychiatric Society

You have been selected by one of the above non-profit partnership organizations to help recognize and celebrate Washington DC “heroes” because you are, or work with, one or more of the professionals listed below. These professionals help persons with SPMI and their families fight for better mental health and better lives on a daily basis. Specific individuals who best exemplify ongoing care and dedication will be selected from nomination forms submitted by members of the Washington DC mental health community like you. Exemplary heroes will be selected within each of the following categories:

- Individual Psychiatrist
- Individual Allied Health Professionals (multiple awards)
- Individual Community Supporters (Professionals who do not meet criteria for Allied Health Professionals e.g. Police Officer, EMT, Judge, etc.)
- Individual Media Professionals (journalist, reporter, etc.)
- Treatment Team (broad category from a small group to an entire facility)

Each nominee will be recognized with a congratulatory letter and an invitation to the event. A selection committee created by National Alliance on Mental Illness DC will select exemplary “heroes” to be recognized during an upcoming recognition event to occur prior to December 2009. Lilly USA is responsible for the program concept and costs but will not be directly involved in the nomination process, selection process or event planning. A third party vendor, VMS, has been selected to work with National Alliance on Mental Illness DC to implement this program in Washington DC.

Please note that you can nominate multiple individuals for a single category. We ask that you use a separate form for each individual or group, otherwise your nomination(s) will not be accepted. Peer and self-nominations will be accepted from **July 20, 2009** to **September 30, 2009**.

To submit a nomination:

- Clearly print or type the information requested on page 3
- Attach a typed essay of 500 words (minimum) that describes the ongoing heroic efforts of the nominee within the Washington DC community to help persons with severe and persistent mental illness, as well as their families and caregivers, fight for the best possible mental health and quality of life. **Incomplete forms will not be accepted.**
- The essay should include the nominee's name at the top of each page.
- If you are nominating someone other than yourself, please include your name below the nominee's name on each page.
- Supporting articles and photographs are accepted, but will not be returned.
- Nominations received after the deadline **September 30, 2009** will not be accepted.

Completed applications can be sent to the address below, or faxed to 317.805.6656 to the attention of Heroes in the Fight. If you have questions regarding the application process or wish to remove the nomination from the process, please call us at the telephone number listed below.

Heroes in the Fight
c/o VMS
8425 Woodfield Crossing Blvd., Suite 370
Indianapolis, IN 46240
Phone: 317.805.6600 extension 170
Fax: 317.805.6656
HITF@vmsbiomarketing.com

NOTE: Individuals employed by or affiliated with organizations having policies against participation in industry sponsored programs are requested to not participate in this program.

***Required**

*Nominee (person or team to be recognized)_____

*Street Address_____

*City_____ *State_____ *Zip_____

*Phone (____)_____

E-mail address _____

By signing this application, you indicate your consent for Lilly and its Agents to contact you for more information regarding this program. Nominees selected for recognition by the Selection Committee will be provided the option to either participate in the recognition event by signing a consent form or to decline participation in the program.

NOTE: Should someone not acting in a professional capacity be nominated, it is expected that the nominator has discussed completely with the nominee this program and that they are being nominated and the nomination is done with their full permission.

By signing this application it signifies that if photographs are submitted, that they are original (not copied from or based upon or derived from any other artwork or material) and I am or the nominee is the sole owner of the photograph. If the entry is photography, DVD, or other likeness of any person, I assert that all persons included in my submission have given permission for this creative work to be entered.

By signing this application, it signifies that I have reviewed and approved it and confirm that it is true and correct in all respects. I affirm and attest that I am of the age of 18 years or older and understand that in order to submit this application, I must be 18 years or older and the nominee(s) must be 18 years or older.

*Name of nominator (your name)_____

*Street Address_____

*City_____ *State_____ *Zip_____

*Phone (____)_____

E-mail address _____

*Nominator's signature _____ *Date_____

***ACHIEVEMENT AWARD CATEGORY**

(Select ONE of the categories below, each category has a list of examples)

- Individual Psychiatrist (1 award recipient)
- Individual Allied Healthcare Professionals (multiple award recipients)
 - Psychiatric Nurse
 - Physician Assistant
 - Nurse Practitioner
 - Psychologist
 - Pharmacist
 - Counselor
 - Social Worker
 - Case Manager
 - Therapist
 - Other healthcare professionals who work in the SPMI field
 - Continuing Ed Coordinator
 - In-service Coordinator
 - Intake Worker / Crisis Worker
 - Assertive Community Treatment Member

- Individual Community Supporters (Professionals who do not meet criteria for Allied Health Professionals e.g. Police Officer, EMT, Judge, etc - multiple award recipients)
 - Judge
 - Community Advocate
 - Policy Maker
 - Lawyer
 - Corrections Staff
 - Diversity Outreach Program Staff
 - Government Agency Employee
 - Law Enforcement Staff
- Individual Media Professional (1 award recipient)
 - Journalist
 - Reporter
 - Other
- Treatment Team (1 award recipient)
 - Broad category from a small group to an entire facility

Terms and Conditions:

To nominate an individual, please complete the entry form (including the personal details of the nominee and nominator) and send to the address or the fax number on this form. Additional forms are available by contacting VMS via phone at 317.805.6600 extension 170 or via email at: HITF@vmsbiomarketing.com

All nominees must be at least 18 years or older. Nominators are limited to one entry per nominee; however, you may submit multiple nominations for different nominees. The sponsor, Lilly, holds no responsibility for entries that are lost, damaged, delayed, or not received. The award recipients will be decided by a Selection Committee created by National Alliance on Mental Illness DC. The award recipients will be notified by **October 12, 2009**. The decision of the Selection Committee is final. The sponsor owns copyright of the entries, and entries will not be returned. Recognition items are not transferable.

Employees of Eli Lilly and Company or its subsidiaries, their relatives, or anyone directly connected with the recognition program are not eligible to be nominated.

Individuals employed by or affiliated with organizations having policies against participation in industry sponsored programs are requested to not participate in this program.