



**BIRMINGHAM GROUP
Health Services, Inc.**

VSAAC

Valley Substance Abuse Action Council

*The
Valley Community
Champions
Awards*



**Recognizing
individuals
who take action
and effect change
to help prevent
substance abuse
in the Valley
community.**



Background Information:

The Valley Community Champions Award is a recognition given to those individuals who *take action and effect change* in the field of substance abuse prevention and or intervention activities. There are many people from all walks of life, all socio-economic backgrounds and all levels of education who contribute to the general social, physical, mental and emotional well-being of their community.

Individuals can be nominated by friends or colleagues or identified by VSAAC staff.

Nomination Process:

Fill out application completely and legibly

Supporting documentation is limited to 2 pages

Winners will be notified after the selection process

Awards will be presented at the Valley Community Champions Breakfast

Nominees must have made their contribution in the Valley community

Nominees should:

- Nominees should be individuals who have made contributions that have positively impacted some group, project or program or
- Nominees have developed or coordinated a new substance abuse prevention / intervention project in the Valley community and
- Live or work in the Valley (Ansonia, Derby, Oxford, Seymour, and Shelton)

Nominations should be submitted via this form and faxed, mailed, or emailed to VSAAC:

Mailing Address:

435 E. Main Street, PO Box 658, Ansonia, CT 06401

Office Address: 301 Main Street, Ansonia, CT 06401

Fax: (203) 736-6359

Email: vsaac@bghealth.org

For more information contact VSAAC:

Phone: (203) 736-8566/Email: vsaac@bghealth.org



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Community Champions
Take Action & Effect Change
Nomination Form

Section I: Nominator Information

Name:

Address:

Phone:

E-Mail:

Signature of Nominator _____

Section II: Nominee Information

Name:

Address:

Phone:

E-Mail:

Section III: Additional Nominee Information

Occupation:

Professional Accomplishments:

Volunteer Activities:

Section IV: Nominating Statement:

(Please describe in 150 words or less why they should be a Community Champion, use additional sheet as needed and attach any additional supporting documentation)

Date of Nomination_____