

MHA- SPARTANBURG 2025 SYMPOSIUM

Celebrating 10 Years of Making a Difference: the Power of Mental Health Advocacy LIFETIME ACHIEVEMENT AWARD

Background

The Lifetime Achievement Award is given annually by MHA-Spartanburg at the Annual Mental Health Symposium held in the fall. This award is to be given to an individual in our Spartanburg, Cherokee, or Union communities who has dedicated their life and career in the mental health field. This individual should be someone who serves as a role model to others currently in the mental health field or who has been a pioneer in their area of work.

The first recipient of this award was Dr. James "Jim" Rentz who was instrumental in pioneering family and marriage therapy efforts in Spartanburg County. Dr. Rentz taught as an adjunct professor at Converse University for over 18 years providing our education and training for many much-needed therapists in the family and marriage counselling field.



Eligibility

Nominees must reside or work in Spartanburg, Cherokee, or Union County. Once all nominations are submitted, a panel will review each COMPLETE nomination packet and make selections on the following criteria:

1. The nominee exhibits a life dedicated to the mental health community, AND
2. The nominee has served a mentor to other mental health professionals OR who has made significant contributions to the mental health community in the Upstate AND
3. The nominee's work and impact have occurred over several decades.

Deadline and Questions

Please mail, scan or email your completed packet by September 1, 2025 to:

MHA-Spartanburg
Attention Susan Lea
PO Box 5991
Spartanburg, SC 29304

Or email or scan to info@MHASpartanburg.com

QUESTIONS?? Contact Susan Lea Advisory Board Chair at 864 529-1307 or SusanLeaTherapy@gmail.com

2025 LIFETIME ACHIEVEMENT NOMINATION FORM

Nominee Information

Name (Ms./Mr./Mrs./Dr./Rev./Other): _____

Home Address:

Street City State Zip Code

Business Address:

City State Zip Code Street

Title: _____

Employer: _____

Daytime phone _____ Evening phone _____

Cell phone _____ Email _____

Nominator Information

Name: _____

Address:

Street City State Zip Code

Daytime Phone _____ Evening phone _____

Cell phone _____ Email _____

Statement of Nomination and Supporting Letter

Using the guidelines below, tell us in writing about your nominee and why they should be chosen for the Lifetime Achievement Award. The statement should be 1000 words or less in 12 pt. font.

Briefly describe how the nominee exhibits a life dedicated to the mental health community. Please give specific examples of their efforts.

Briefly describe the nominee's background and accomplishments that would validate his/her being a mentor and/or well-respected mental health professional.

Submit one letter of support that references the person by name that supports the nomination and explains why they do.

APPLICATION DEADLINE IS September 1, 2025 AT 5:00 PM.

