

MHA Spartanburg 2025 Symposium

Celebrating 10 Years of Making a Difference: the Power of Mental Health Advocacy Youth / Young Adult Volunteer of the Year Nomination

Background

MHA Spartanburg presents the Youth / Young Adult Volunteer of the Year annually to recognize a youth and young adult who has given their time, talent or efforts in volunteer service to support the mission of MHA Spartanburg: to promote positive mental health, to raise awareness about mental illness, to reduce stigma that prevents treatment seeking, and to begin the community conversation needed about these issues. Prior recipient served on the board of MHA Spartanburg and spearheaded the inaugural Be Kind to Your Mind event.



Eligibility

Nominees must reside, work, or attend a school or college in Spartanburg, Cherokee, or Union County. The nominee must be either 17 or younger or 18-22 years old (one award each is available to these age groups). Once all nominations are submitted, a panel will review each COMPLETE nomination packet and make selections on the following criteria:

1. Has demonstrated leadership and service in support of the mission of MHA Spartanburg, AND
2. Exhibits advocacy for the mental health field through specific activities.

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, 864-529-1307, SusanLeaTherapy@gmail.com.

YOUTH / YOUNG ADULT ADVOCATE OF THE YEAR 2025 NOMINATION FORM

Nominee Information

Name (Ms./Mr./Other): _____

Home Address:

Street	City	State	Zip Code
--------	------	-------	----------

School OR 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 Youth / Young Adult Advocate of the Year Award. The statement should be 1000 words or less in 12 pt. font.

Briefly describe why the nominee is considered a voice, advocate or mentor in the mental health community and any specific activities that exhibit their advocacy of mental health.

Submit one letter of support (from another person) that explains support for the nomination of this individual.

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

