



2021 Call for Honors

Genia Young, LMFT, ATR-BC, January 2022

The Honors Committee has opened the 2020 Call for Honors nominations.

Applications are accepted now through February 12, 2021. Professional members of the Association may nominate art therapists to be considered for these prestigious awards that honor their outstanding contributions to the Southern California Art Therapy Association (SoCalATA), the art therapy profession, art therapy education, and clinical work. The Honors Committee encourages all Professional Members to review the award categories and nominate colleagues that best fit the description for each respective award. Please keep in mind that submitted nomination packets should include the **Official Honors Nomination Form** and full supporting documents as described for each individual award below.

Awards will be presented at the SoCalATA Annual General Meeting, **February 26, 2022**. Please save this date so that you and your nominee can be present on the day.

ALL HONORS NOMINATION PACKETS SHOULD INCLUDE:

- Official Honors Nomination Form (online) or (pdf)
- All Supporting Documents (*as described in the specific award guidelines below*)

SUBMIT HONORS NOMINATIONS

You can submit applications in the following formats:

- Complete pdf nomination form below and email with supporting documents to info@socalarttherapy.org.

Official Honors Nomination Form PDF

- Complete online nomination form and upload supporting documents here:

*All Honors nominations must be received by **February 12, 2022**.

NOTE: All nominators will receive a confirmation email by **February 19th**. If you have not received a confirmation by then, please contact info@socalarttherapy.org.

Appendix A

Art Therapy Clinician Award Is conferred on a Professional member of the Association in recognition of significant contributions of work with clients, rather than service to the Association or contributions to the field of art therapy in general. The ATCA is awarded for outstanding service in one of the following categories: **Adult Services; Adolescent Services; Child Services; Family Services; or General Services.**

ATCA Qualifications

The contributions of nominees for ATCA should be viewed from three (3) broad perspectives:

1. reason for the nomination in one of the five clinical categories;
2. other information pertinent to substantiating the nominee's work in the category named.; and
3. endorsement from the nominee's supervisor, clinical director, colleague, or program administrator who is familiar with the nominee's actual performance.

ATCA Nomination Checklist

A nomination for ATCA shall be considered complete with the following:

1. The official nomination form completed by the nominating Professional member of the Association.
2. A letter from the nominator (word or PDF format) detailing:
 - a. Significant contributions of work with clients and the reason for the nomination in one of the five clinical categories
 - b. Information pertinent to substantiating the nominee's work in the category named
3. Letter of endorsement from the nominee's supervisor, clinical director, colleague, or program administrator who is familiar with the nominee's actual performance. This may or may not be an Association Professional member.
4. The nominee's Curriculum Vitae (In word or PDF format).

BE SURE TO DESIGNATE THE CLINICAL CATEGORY IN YOUR LETTER.

Appendix B

Distinguished Educator Award is conferred on a Professional member of the Association In recognition of significant contributions to the education of professionals in the field of art therapy, specifically in the area of outstanding teaching and the development of innovative educational practices.

DEA Qualifications

The DEA is conferred for outstanding teaching and education at an AATA approved program. The contributions of nominees for DEA should be viewed from three (3) broad perspectives:

1. major contributions to art therapy education;
2. creative achievements in art therapy education; and
3. supporting materials from the nominee's academic institution.

DEA Nomination Checklist

A nomination for DEA shall be considered complete with the following:

1. The official nomination form completed by the nominating Professional member of the Association.
2. A letter (word or PDF) from the nominator detailing:
 - a. The nominee's major contributions to art therapy education: Please report the nominee's major contributions to art therapy education (i.e., recognition in teaching awarded by the nominee's academic institution), and/or to excellence in teaching.
 - b. The nominee's creative achievements in art therapy education. Please detail all contributions regarding original, imaginative and/or inventive art therapy educational accomplishments including the development of approaches adopted by others.
 - c. The nominee's excellence in teaching.
3. The nominee's Curriculum Vitae (word or PDF).
4. A letter from the art therapy program at which the nominee teaches (i.e., an individual in a supervisory position) supporting the nomination and detailing excellence in art therapy teaching and education at the nominee's academic institution.

BE SURE TO DESIGNATE THE CLINICAL CATEGORY IN YOUR LETTER.

Appendix C

Distinguished Service Award is conferred on a Professional member of the Association in recognition of significant contributions to the field of art therapy, specifically in the area of the Association's internal development as well as its relationship with other organizations.

DSA Qualifications

The contributions of nominees for DSA should be based on outstanding services to the Association.

DSA Nomination Checklist

A nomination for DSA shall be considered complete with the following:

1. This official nomination form completed by the nominating Professional member of the Association
2. A letter written by the nominator detailing:
 - a. The nominee's major contributions to the field of art therapy or to a specific area within the profession:
 - b. The nominee's contribution to the Association or to the professional advancement of art therapy: Please detail all contributions with specific emphasis in the area of the Association's internal development as well as its relationship with other organizations. Include the following applicable information:
 - i. **AATA committees.** Please detail nominee's committee(s) involvement.
 - ii. **AATA governance.** List nominee's Board service and whether an office was held including chapter level involvement
 - iii. **Educating the public about art therapy and AATA.** Specify nominee's involvement in education the public about art therapy through presentations or articles for the public about art therapy and/or media presentations (TV, radio, web, etc.) about the field.
 - iv. **The nominee's creative achievements in the arts related to art therapy.** Document nominee's involvement in creative achievements in the arts related to art therapy, personal art making. Include how personal artistic identity is maintained through ongoing art making. Please indicate number of exhibitions of group and individual invitational shows and juried art exhibitions.
 - v. **Relationships with other organizations.** Describe nominee's history of interfacing with, serving as liaison to, and/or serving on boards for other creative arts, mental health related, and/or other professional associations.
3. Provide the nominee's Curriculum Vitae in Word or PDF format

BE SURE TO DESIGNATE THE CLINICAL CATEGORY IN YOUR LETTER.



2021 Honors Official Nomination Form- DUE FEBRUARY 12, 2021

Email: info@socalarttherapy.org

Section I: NOMINEE AND AGREEMENT

(Type or write the nominee's name in the box above).

_____ Yes, I have obtained this nominee's agreement to receive this honor.

_____ No, I have not obtained this nominee's agreement to receive this honor.

Section II: AWARD TYPE (Check a box to indicate which award you wish our nominee to receive. Please only include one award type per nominee and application.)

_____ Art Therapy Clinician Award

_____ Distinguished Educator Award

_____ Distinguished Service Award

Section III: NOMINATION CONTACT INFORMATION (Type or write your contact information below.)

Nominator's Name: _____

Nominator's E-mail Address: _____

Nominator's Phone Number: _____

Nominator's Mailing Address: _____

Nominator's AATA Membership ID: _____

SUPPORTING MATERIALS

Include the following:

_____ Complete Nomination Form

_____ All Supporting Materials for the Specific Award Type (See guidelines and overview in appendices A, B, C.)

NOMINATOR SIGNATURE:

Nominator Signature- I wish to nominate the individual listed above for the award indicated. I have, furthermore, read through the qualifications, checklist, overview, and selection criteria and have included all necessary documents for the award type marked above for this nomination.

Signature

Date