AMTA-IL 2020 Chapter Award Nominations

The AMTA-IL Awards Committee is now accepting nominations for the 2020 Annual Chapter Awards presented to individuals who are recognized by their peers for their outstanding contributions and service to the massage therapy profession. Please take this time to acknowledge the accomplishments of your fellow massage therapists or yourself. Nominations are being accepted January 15 - February 29.

To nominate someone, choose from one of the award categories listed below. Please read each category carefully. Only one category per nomination form will be accepted. If person(s) are being nominated for more than one award category, a separate nomination form must be filled out. The forms must include all of the information requested in order for a nomination to be considered. Awards will be presented at the Annual Spring Conference.  **\*\*\*\*Deadline to submit nominations is February 29th\*\*\*\***

Award Categories

**Meritorious Award** - The Meritorious Award recognizes an individual who serves or has served diligently and generously as a chapter volunteer. The recipient must be an active member of AMTA-IL. They’ll not only receive recognition at the chapter level, but they will also be honored for their merits at the AMTA National Convention in Phoenix, Az.

**Distinguished Service Award** - This award is presented to an individual or group of persons who have contributed significantly to the expansion and continuity of our profession through education and research, government relations, community outreach and chapter growth. Recipients can be part of a larger massage community but are not required to be AMTA members.

**Massage Therapy Educator of the Year Award** - The Educator of the Year Award is given to a massage therapy instructor who educates students not only from an intellectual and professional standpoint, but with compassion and inspiration. He/she supports and encourages their students to continue their knowledge and growth in the massage therapy profession beyond the classroom and after graduation. They exemplify good ethics and business practices at all times. The recipient is not required to be an AMTA-IL member, but must currently be teaching at the time of their nomination at an institution with an AMTA approved massage therapy program.

**Outstanding Student of the Year Award** - The Student of the Year demonstrates an exceptional understanding of the anatomy and hands-on practice as it pertains to massage therapy both in the classroom and clinical settings. He/she conducts themselves in a professional and ethical manner at all times. Outstanding students show support and offer assistance to their classmates and are highly regarded by their instructors and peers. They demonstrate a zeal and desire to succeed as a professional. licensed massage therapist. When community outreach events are presented, they volunteer to help AMTA promote the massage therapy profession. Recipients must currently be enrolled in an AMTA approved massage therapy program and be an AMTA-IL student member.

**Humanitarian Award** - This award acknowledges an individual massage therapist who compassionately goes above and beyond to serve a particular group or groups of people in need; e.g. veterans, cancer patients, the homeless, victims of traumatic events etc. The recipient(s) can be part of a larger organization and not be required to be an AMTA-IL members. However, they must be an Illinois state licensed massage therapist.

Please fill out the nomination form below and email it to **cestearnsmk@gmail.com**or mail to AMTA-IL Awards Committee c/o Christine Stearns 3677 Boskydell Rd Carbondale, IL 62903 (postmarked no later than February 29th) D**O NOT** submit the first page of this document. **Submit nomination form only!**

**AMTA-IL 2020 Chapter Nomination Form**

Nominees Information

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for this nomination (be specific)

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Name of person submitting nomination

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_