

## Heart of Relay

### **Recognition of American Cancer Society Relay For Life Best Practices Nationwide**

The Heart of Relay Award is designed to recognize successful practices and innovations supporting both the mission of the American Cancer Society and reaching our 2015 goals. In general, the awards are based on recognizing a “promising practice” in the categories below – not to recognize a single Relay as the “best” Relay in Cancer Control, etc.

All events that follow National Relay For Life Standards are eligible to apply. The Heart of Relay Review Committee will be looking for results of implementing programs in these categories **based on, but not limited to, the concepts of:**

- Activities occurring before, during, and after the Relay, with special consideration given to activities that are sustained year round.
- How the project supported 2015 goals and nationwide priorities.
- Increasing presence of the ACS and Relay in the community.
- The number of people reached.
- Goals of the activity

### **Major weight will be given to:**

- The inclusion of targeted strategies
- Practicality and ease of duplicating the activity at other Relays nationwide.

### **Heart of Relay Categories:**

The Heart of Relay program is designed to promote recognition at both the Division and National levels. This year there are 3 mission categories: Mission Delivery, Survivorship and Youth. Divisions are encouraged to evaluate submissions in each category, based on National criteria, and recognize promising practices. Divisions may forward up to three submissions in each category to the National Advisory Team for nationwide consideration. (Hawaii and High Plains will submit applications separately).

### **Mission Delivery, which includes:**

Cancer Prevention and Early Detection  
Uniting Communities  
Research Promotion  
Year Round community outreach/awareness

### **Advocacy**

### **Survivorship**

### **Youth Heart of Relay Categories:**

Outstanding Engagement of Youth in a Community event  
Youth Event Mission Delivery (for All youth High School and College Relays)  
Youth Event Survivorship (for All youth High School and College Relays)

### **Submission Guidelines:**

All National level submissions including any attachments, (such as photos, forms, clippings, etc.) **MUST be submitted electronically and must include the nomination form. Nominations are due to Toni Williams ([toni.williams@cancer.org](mailto:toni.williams@cancer.org)) no later than **August 31, 2007****



**HEART OF RELAY – SURVIVORSHIP  
SUBMISSION FORM**

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Community Event:

Youth Event

Relay For Life of \_\_\_\_\_ Date of Event:

Division:

State:

County:

County Population:

Lead Volunteer:

Lead Staff:

Phone Number:

Phone Number:

Email Address:

Email Address:

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***How did your Relay For Life engage the local Survivors/Caregivers?***

***Be sure to include:***

- How does this Relay support the National Survivorship Model
- Activities occurring before, during, and after the Relay.
- How the project supported 2015 goals.
- Increasing presence of the ACS and Relay in the community.
- The number of people reached.
- Goals of the activity

***Was there an opportunity to share other ACS information? If so, please explain.***

***What were the outcomes achieved in your community for Survivorship through Relay?***

***How will you carry this work out in a year round strategy?***

**HEART OF RELAY – YOUTH ENGAGEMENT IN A COMMUNITY EVENT  
SUBMISSION FORM**

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Community Event:

Relay For Life of \_\_\_\_\_ Date of Event:

Division:

State:

County:

County Population:

Participating Schools:

Participating Schools Combined Enrollment:

Lead Volunteer:

Lead Staff:

Phone Number:

Phone Number:

Email Address:

Email Address:

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***How did your Relay For Life engage youth in your community Relay For Life?***

***Be sure to include:***

- Activities occurring before, during, and after the Relay.
- How the project supported 2015 goals.
- Increasing presence of the ACS and Relay in the community.
- The number of people reached.
- Goals of the activity

***What activities did you utilize to engage youth in Relay For Life?***

***What were the outcomes achieved in your community with these youth activities?***

***How will you carry this work out in a year round strategy?***

**HEART OF RELAY – YOUTH EVENT MISSION DELIVERY  
SUBMISSION FORM**

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Did this event meet criteria to qualify as a youth event?    Yes                       No

Relay For Life of \_\_\_\_\_ Date of Event:

Division: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ County Population: \_\_\_\_\_

Participating Schools:

Participating Schools Combined Enrollment:

Lead Volunteer:

Phone Number:

Email Address:

Lead Staff:

Phone Number:

Email Address:

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***How did your Relay For Life engage the school campus and the surrounding community in Mission Delivery?***

***Be sure to include:***

- Activities occurring before, during, and after the Relay.
- How the project supported 2015 goals.
- Increasing presence of the ACS and Relay on the school campus and in the surrounding community.
- The number of people reached.
- Goals of the activity

***What aspects of Mission Delivery did you include in your plans?***

Advocacy

Cancer Prevention and Early Detection

Quality of Life Program (ex. Road to Recovery or promotion of 800#)

Uniting Communities (Diversity)

Research Promotion

Year Round community outreach/awareness

***Please explain each Mission Delivery component you have engaged the Relay community in and the activities you did to support that effort. If more than one aspect of Mission Delivery was implemented through Relay, please explain each aspect and activities.***

***What were the outcomes achieved on the school campus and in the surrounding community through Mission Delivery through Relay?***

***How will you carry this work out in a year round strategy?***

