



Courage in the County Nomination Form



Courage in The County is a PSA campaign that will create an awareness of the many types of cancers and the importance of early detection and treatment. Our goal is to encourage viewers to be aware of symptoms and screenings available, and to encourage them to see their health care provider. Viewers are asked to submit their personal stories, so the PSA campaign can be personalized to Aroostook County patients, families, and survivors.

Please complete the information below if you would like your story, or the story of a friend or family member, to be considered as part of our Courage in The County PSA Campaign.

Your Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail Address: _____

- I am a: Survivor
 Friend/family member/acquaintance of someone who has battled cancer

Name of person who battled cancer: _____

Relationship to you: _____

Type of Cancer: _____

Date of Diagnosis: _____

Name of Treatment Center and Doctor: _____

1. Please describe your or your friend/family member/acquaintance's journey with cancer, including initial reaction to being diagnosed, treatment, and outcome:

2. Was the cancer diagnosed early? If so, how important was the early diagnosis?

3. How has cancer changed you or your loved one's perspective on life? Do you have any lessons to share with others who are currently battling cancer?