



**ADL NORTH TEXAS/OKLAHOMA REGION
② RESOLUTION OF RESPECT * 2011-2012**

PLEASE PRINT

School _____

Contact 1 Name _____

Title _____

E-Mail Address _____

Contact 2 Name _____

Title _____

E-Mail Address _____

Principal _____

E-Mail Address _____

Phone _____

Fax _____

Website _____

Address _____

City _____

State _____

Zip _____

1) All or at least a majority of school members (students, staff and faculty) must sign the Resolution of Respect or other approved anti-bias pledge. How many people signed?

Students: _____ Faculty/Staff: _____

2) Signing Dates - Began: _____ Completed: _____

3) How was the Resolution of Respect distributed? (check all that apply)

- Copy for each student Copy sent to parents/guardians
 Poster in hallway/classroom
 Other: _____

4) Supplemental materials associated with signing the Resolution of Respect (please include copies):

- PowerPoint Presentation Newspaper/Newsletter articles DVD/video tape
 Photographs (with description, including names of individuals and affiliations)
 Press release Other (please specify): _____

Please send completed Resolution of Respect Form to:
Attention: Associate Regional Director
Anti-Defamation League, 12800 Hillcrest Road, Suite 219, Dallas, TX 75230
Phone: (972) 960-0342 * Fax: (972) 960-0591