



② COALITION FORM

2008-2009

A coalition of students and educators must oversee the implementation of your school's No Place for Hate® activities.

School Name

Contact 1 Name	Title/Role	E-mail Address
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Contact 2 Name	Title/Role	E-mail Address
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Principal Name	E-mail Address
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Phone	Fax	Website
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Address

City	State	Zip
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1) When did your Coalition meet?

2) Who served on your Coalition? Please list Coalition members and indicate their roles:

<u>Name</u>	<u>Student</u>	<u>Educator</u>	<u>Parent/Guardian/ Community Member</u>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Photographs (with description, including names of individuals and affiliations)

Please send completed Intent Form to 4635 Southwest Freeway, Houston, TX 77027,
via fax to (713) 627-2011 or e-mail to southwest@adl.org.
In Austin: 11940 Jollyville Rd., Ste. 309-S, Austin, TX 78759,
via fax to (512) 249-1661, or via e-mail to austin@adl.org
For more information call (713) 627-3490, (512) 735-8012, or visit www.adl.org/southwest.