

Franklin Mayor's DRUG TASK FORCE



*Turning on the Power of Prevention
in the Franklin-Hill Community*

MEMBER PROFILE

We, the Franklin Mayor's Drug and Alcohol Abuse Task Force, want to collect information from our community partners so that we can:

- Effectively communicate with our members and partners
- Best utilize everyone's skills and abilities
- Develop a larger network of support for our mission and for specific projects
- Make sure we are communicating with, and working with, a broad representation of the Franklin community

Our Vision: Our vision for Franklin and Hill is a healthy, vibrant and substance-abuse free community that supports the positive development of our youth to become strong, engaged and healthy adults.

Our Mission: To engage the communities of Franklin and Hill in working together to promote positive, alcohol and drug-free lifestyles for youth and families.

Please tell us how you may be willing and able to support our mission.

1. Are you willing to do any of the following activities? Please check all that apply.

- ☐ Receive emails from the Task Force regarding research news, tips, events, action alerts, and other community updates.
- ☐ Share Task Force information with friends, family, co-workers, organizations and other community members.
- ☐ Promote the mission of the Task Force through your actions and words.
- ☐ Be available to help advance the mission of the Task Force by providing your specific knowledge or expertise.
- ☐ Volunteer at community events, representing the Task Force.
- ☐ Attend monthly Task Force meetings as often as you're able.
- ☐ Participate in a Task Force Subcommittee (or workgroup) to help plan and carry out projects.

2. Do you have experience or interest in any of the following? Please check all that apply.

- | | |
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| <input type="checkbox"/> Arts/Artistic Expression | <input type="checkbox"/> Volunteer Recruitment |
| <input type="checkbox"/> Working with parents/parent education | <input type="checkbox"/> Grant Writing |
| <input type="checkbox"/> Data Collection/Data Analysis | <input type="checkbox"/> Social Media/Social Networking (Facebook, Twitter, etc.) |
| <input type="checkbox"/> Youth engagement | <input type="checkbox"/> Editing |
| <input type="checkbox"/> Community Event Planning | <input type="checkbox"/> Community Organizing |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Strategic Planning |
| <input type="checkbox"/> Media and Public Relations | <input type="checkbox"/> Legislative Advocacy |

3. Your Contact Information

Your Name	
Organization	
Address	
Phone	
Email	

4. Please list any other individuals, organizations, businesses or community groups that you recommend we connect with.

Please list the primary contact name/organization (if applicable) below. Please provide any other information about this contact that you feel would be helpful for the Task Force.		
Can we mention your name when we contact this person?	YES	NO

Please list the primary contact name/organization (if applicable) below. Please provide any other information about this contact that you feel would be helpful for the Task Force.		
Can we mention your name when we contact this person?	YES	NO

Please list the primary contact name/organization (if applicable) below. Please provide any other information about this contact that you feel would be helpful for the Task Force.		
Can we mention your name when we contact this person?	YES	NO

Please return the completed form to the Coalition Coordinator at Bessie Rowell Community Center.
The Franklin Mayor's Drug and Alcohol Abuse Task Force thanks you for your time and involvement!