



LOCAL COMMUNITY ACTION PLAN

When I return home I will reach out and educate the following people in my community about the Own My Power Freedom from Bullying Campaign:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

I will set up meetings with my teammates and follow-up with them on a (timeline)_____.

I will get others to Take Action and teach them how to log onto the YO! website and sign the petition, share their story, write to their representative etc. I will get (#)_____ of people to Take Action by October 15th!

When I speak to schools, media, policy makers, I will educate them about:

I plan to get my school to (activity)_____ by (activity date)_____.



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I plan to collect video footage from my community on bullying. Yes / No

I plan to start a Disability Pride Day at my school. Yes / No

I plan to start a Disability Pride Club at my school. Yes / No

I will encourage my school to support and participate in the following activities:

I will keep in contact with the following Team Members:

Name: _____

Email: _____

Phone: _____

Name: _____

Email: _____

Phone: _____

Name: _____

Email: _____

Phone: _____



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I, _____, anti-bullying is important and should be implemented in California's schools. I am committed to working on the Own My Power Freedom from Bullying Campaign that was launched at the YO! Disabled & Proud 2011 Youth Organizing Summit

I understand more about bullying as a result of my attendance at the YO! Organizing Summit and know who I can contact if I need support or help in completing my local community action plan.

Signature

Date