

SCHOOL LETTERHEAD

Template Letter of Commitment from Leadership of School/District

Prevention FIRST! and the Ohio Suicide Prevention Foundation,

(School Name) is requesting to implement the *Sources of Strength* Secondary Program. We recognize that funding for this program has been provided by the Ohio Department of Mental Health and Addiction Services. This program is consistent with our goals to support student well-being, strengthen youth-adult connectedness, enhance positive student coping behavior, increase school belonging and resilience, and reduce bullying and the risk of suicide and violence.

(School Name) agrees to implement the Sources of Strength program with fidelity. Our intended implementation will begin (Month/Year). We recognize that Sources can be used to reach compliance with HB123, aka the SAVE Students Act. Check one of the following:

- ☐ We DO intend to use Sources to reach compliance with HB 123.
- ☐ We DO NOT intend to use Sources to reach compliance with HB 123.

In addition, we understand that a certified Sources of Strength Trainer (Sources Trainer) will need to lead (School Name)'s Adult Advisor and Peer Leader trainings.

Our Adult Advisor and Peer Leader trainings will be led by:

- ☐ (Name of a certified Sources of Strength Local Trainer). We **do not need** to be connected with a certified Local Trainer or National Trainer.
- ☐ (Name of a provisionally certified Local Trainer). We **need to be connected** to a Regional or National Trainer who can co-lead the training and help our trainer earn their certification.
- ☐ We need to be connected with a certified Sources Trainer.

Sincerely,

[Name]

(Principal, Assistant Principal, or District Administrator)

Please email the form on school/district letterhead with signatures, to Kelly Roberson at kroberson@prevention-first.org and Erin Horn at erin@sourcesofstrength.org.