# Coalition Name

#### Coalition Coordinator

Firstname Lastname

[optional photo]

Phone  
Address  
Email

Bio: 50 words or less describing prevention or community organizing experience, and agency employed by

#### Coalition Mission

A brief mission statement for your coalition here. You can also add a coalition logo.

## Community Name

Optional image of community

### About the Community Prevention and Wellness Initiative (CPWI)

CPWI is a partnership of state agencies, counties, schools and local prevention coalitions supporting communities in preventing alcohol and other drug abuse and its negative consequences.  CPWI priorities include reducing underage drinking, marijuana use and opioid misuse/abuse among middle and high school aged youth. By providing evidence-based practices and promoting the positive changes in communities, we can build healthier communities.

### About the Coalition: Communities & Schools Working Together

* When coalition was founded/key prevention accomplishments
* Describe some sectors represented by members/partners
* Describe some strengths and challenges

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### About Our Community



##### County Contact

Name

Phone

Email

#### Other Contacts



##### Student Assistance Program Specialist

ESD Name

Contact Name

Phone

Email

Insert a map of your county using the picture control above.

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**About Prevention Programs in our Community**

* Goals and Strategies
* Program Names/Who Will Be Served
* How results will be measured and reported

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