

# CRIMESTOPPERS

504-822-1111 GNO

crimestoppersgno.org 

Mailing Address: P.O. Box 55249 • Metairie, LA 70055-5249

(504) 837-TIPS • Fax (504) 832-2571

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**LIGHTS ... CAMERA... ACTION !!!!**

**SO YOU WANT TO BE A STAR ?**

**Calling all Talented High School Actors**

**March 13, 2024**

To: **High School Students and their Parents**

From: Crimestoppers, Inc. – Safe Schools LA Anonymous Reporting

Darlene Cusanza, President, and CEO

Dear Students and Guardians/Parents:

Crimestoppers, Inc. operates the **Safe Schools LA Anonymous Reporting** program across Louisiana, which allows students the ability to send anonymous tips through our App for schools to investigate or on [www.SafeSchoolsLA.com](http://www.SafeSchoolsLA.com). Many tips involve bullying/ cyber bullying / sexting or online/social media harassment. As part of our Safe Schools program, we are creating a video allowing students to send a message on zero tolerance for bullying and how we can help “Speak Up” to protect and advocate for ourselves and peers. This video will be part of our educational program and provided free of charge to our school partners. To see one of our videos produced, please visit <https://vimeo.com/manage/videos/840238110>

**We are seeking high school students to appear in the video. Each student will answer simple questions about their experience with bullying.**

For example:

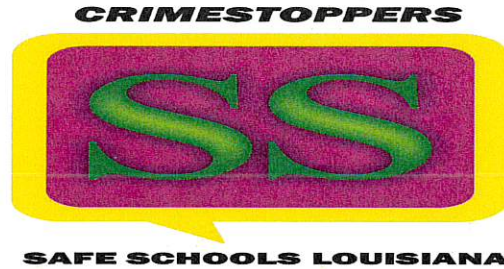
How would you define bullying today in high school?

What can be the effect of bullying on a high school student?

What happens when someone does not speak up when they witness bullying?

What would you do if you knew someone who was bullied?

What is the worst bullying you have seen OR experienced? What would have helped in this case?



### *Calling all Talented High School Actors*

The students will appear both as a group and individually when speaking. They will endorse using the Safe Schools LA anonymous reporting app to Speak Up.

The taping will take place on **Monday, April 1<sup>st</sup> at the WYES studios located next to Delgado Community College**. A specific time will be set for each student to arrive. The entire taping should not take more than 2 hours and the taping will be during the daytime.

The students will be asked to bring two shirts/blouses of different suggested colors. This is to have the best visual appearance complementing our graphics.

The finished video will be shown across the state in our partnering schools, as well as appear on our Safe Schools LA website and other promotional opportunities appropriate to our school settings.

To **thank you** for your time, we will provide each student with a \$25 amazon gift card. Once the video is completed, we will send a link for you to enjoy!

There is no payment provided for appearing in this video and all rights of the video and use remain the sole property of Crimestoppers, Inc.

Each student must have their own transportation.

**You must also send to us in advance a copy of the media release permission slip and your contact information no later than March 25<sup>th</sup>**. A confirmation email will be sent to you with all the specific information for taping on April 1<sup>st</sup>.

Please include your experience with either drama, acting or social media.

Thank you for your interest in supporting the Crimestoppers Safe Schools LA program.

If there are any questions, please contact me at: [Darlene@crimestoppersgno.org](mailto:Darlene@crimestoppersgno.org) or by calling (504) 837-8477.

Please complete the attached page and email back no later than March 25<sup>th</sup> to: [Darlene@crimestoppersgno.org](mailto:Darlene@crimestoppersgno.org).

# CRIMESTOPPERS, INC. Media Release to participate in Bullying Educational Taping

STUDENT'S NAME: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_ School and grade: \_\_\_\_\_

Teacher/ Counselor School Contact: Name \_\_\_\_\_ Email \_\_\_\_\_

**I GIVE MY PERMISSION TO THIS STUDENT to APPEAR in the Bullying Educational Video:**

PARENT or GUARDIAN NAME: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Does Student reside at this address? \_\_\_\_\_ yes

<p>I, as the parent or legal guardian of _____ <small>Please Print name of person photographed or recorded</small> consent and agree, to the following terms and provisions regarding the Media and the above named minor child.</p> <p>Crimestoppers, its nominees, agents and assignees, have unlimited permission to use publish and republish for purposes of advertising, trade or any other lawful use, information about the above named minor and reproductions of their likeness (photographic or otherwise) and recorded voice whether or not related to any affiliation with Crimestoppers with or without their name.</p>	
<p>PLEASE PRINT NAME PARENT/GUARDIAN</p>	<p>RELATIONSHIP TO MINOR</p>
<p>SIGNATURE PARENT/ GUARDIAN</p>	<p>DATE</p>

**EMAIL to [Darlene@Crimestoppersinc.org](mailto:Darlene@Crimestoppersinc.org) NO LATER THAN MARCH 25<sup>th</sup>**