

Work for Justice, not for Dow

School/Community where collected:

We, the undersigned, pledge not to work for Dow Chemical Company or any of its subsidiaries until the company addresses its responsibilities in Bhopal, particularly:

1. **Obey the Law.** Dow must ensure that its fully-owned subsidiary ceases to abscond and, 13 years after it was originally summoned, faces longstanding criminal charges of "culpable homicide" (manslaughter) before the Chief Judicial Magistrate's court in Bhopal.

2. **Clean Up the Poison.** Dow must clean up toxic wastes and contaminated groundwater that Union Carbide left behind in Bhopal, thereby ending the cycle of contamination and killing that has been allowed to continue for the past 20 years. Dow must also provide fair compensation for those who have been injured or made ill by this contamination.

Those who sign the pledge will receive three emails: 4 months before, on and after their graduation date, reminding them of their pledge not to work for Dirty Dow. Note: all pledges will be shared with Dow.

	<u>Name</u>	<u>E-mail</u>	<u>Major & Dept.(Non Students: city, state)</u>	<u>Graduation Mo./Date (Non Students: Profession)</u>	<u>Would you like to find out more/get involved with Students for Bhopal?</u>
1					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
2					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
3					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
4					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
5					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
6					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
7					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
8					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
9					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
10					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
11					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
12					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
13					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
14					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
15					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
16					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
17					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
18					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____
19					<input type="checkbox"/> no <input type="checkbox"/> yes - Phone #: _____