

Ronald McDonald House® of Portland, Maine, Inc.

Teen Ambassador Application Form

Applicant Name:		Date of Birth:_	
Address: City:		State:	Zip Code:
Name of School:		Grade:	
Preferred Phone: ()		Email:	
Parent/Legal Guardian Name (please print			
Emergency Contact:		Relationship:	
)
Please list the activities you are involv	red in (sports, music, thea	ater, community s	service, clubs, etc
How would you plan to fit the monthl	ly meetings, activities and	d events into you	ır schedule?
Why do you believe you should be sel	lected as a member of ou	ur Teen Ambassa	dor Program?
What experience have you had that w	ould help make a contrik	bution to the Am	bassador Program?
What do you hope to gain from this p	rogram?		



References

Please provide two letters of reference with your application. Reference forms are attached. References must be 21 years of age or older and non-family members. One reference must be from a school teacher, advisor, coach, guidance counselor or other community leader.

Statement of Commitment

If selected, I agree to attend scheduled meetings and be an active participant in all activities and events. I am aware that this is a full school year commitment. I understand that lack of active participation greatly diminishes the Teen Ambassador program and that lack of participation may be cause for dismissal from the program. I will make my best effort to obtain materials from the appropriate person, and continue my support when I have missed a meeting.

Signature of Applicant	Date

Please return your completed application packet to Ronald McDonald House® by **Friday, April 28, 2017.** Interviews for all applicants will take place in April 2016.

