



Community Ambassador Program Application 2010

General Information

Name	E-mail
Home Address	
City, State ZIP	
Home Phone	Mobile Phone
What is the best time to reach you?	
Which number do you prefer?	

Age Requirements

- Please check if you are over 16 years of age.
 Please check if you are over 18 years of age.

Education

High School

College	Major(s)
Degree	

Graduate Study	Major(s)
Degree	

Employment History

Employer	Location
Title	From: To:

Employer	Location
Title	From: To:

Availability (Please mark the boxes to indicate when you are generally available)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

About WGBH

How did you hear about volunteer opportunities with WGBH?

Why are you interest in volunteering with WGBH, and why are you specifically interested in the Community Ambassador Program?

Related Experience and Skills

Volunteer Experience

Organization	Location
Position	From: To:

Organization	Location
Position	From: To:

Customer Service Experience

Please briefly describe any previous customer service experience.

Skills

We often receive specialized volunteer requests for various events throughout the Foundation. Please list any skills, hobbies, special training or interests that you may have as completely as possible (ex. Foreign language, photography, calligraphy, typing, drawing, theater, etc).

Please indicate the names, addresses, e-mail addresses, and telephone numbers of two community, academic, or professional references.	
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Training Requirement

If selected to participate in the Community Ambassador Program, will you be available to attend the mandatory 2-hour training session on Wednesday, May 26, from 6:30-8:30pm?

Yes

No

I, the undersigned, verify that I have been truthful on this application

Applicant's Signature
Printed Name
Date

Please send completed form via fax or post mail:

Attn: Stacy Kasdin, WGBH, One Guest Street, Boston, MA 02135

Fax: (617) 300-1026

Must be postmarked no later than May 19