



Application for Ambassador

411 Mercy Drive
Orlando, FL 32805

Name _____ Date _____

Address _____

Email _____ Phone _____

Are you 21 years or older ____ YES ____ NO

Have you completed 10 or more volunteer hours with SHFB? ____ YES ____ NO

Relevant professional or volunteer experience			
Company, school, or organization	Location (City and State)	How long did you hold this position	Responsibilities included

Special Skills: _____

Other Associations: _____

Special Interest: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ☐ Yes ☐ No

If yes, include date/s and disposition _____

For SHFB Use Only:

Date Received: _____ Review Date: _____

Walk – In Email Fax

Date of phone screen: _____ Training scheduled: _____