



Student Ambassador Request Form

Today's Date _____ Date Ambassador requested _____

Kind of Activity _____

Location _____ Parking Passes needed? Yes or No

Directions _____

Name of contact person _____

Contact Phone _____ Extension _____

Report Time _____ Event Time _____ to _____ # of Ambassadors _____

Are Interpreters Required? Yes or No Language _____

Ambassadors Duties:

<i>This box is for office use only</i>	
Ambassadors Assigned / Times:	
_____	_____
_____	_____
_____	_____
_____	_____

Please submit this form to the office of Marketing and Public Relations
Rachel or Sheryl 909/652-6113, 909/652-6120 Fax