

## AIRPORT AMBASSADOR PROGRAM APPLICATION

Please print and p	resent your form in-pe	rson, by fax, n	nail or e-mail.		
Date					
Name (First, MI, La		Date of Birth			
Address					
City		State			Zip
Home	Work Pł	Work Phone		Cell Phone	
E-mail					
Advanced Education, Certifications or Special Job Training					
Previous Volunteer	Experience				
Hobbies, Special Talents or Skills					
Community Affiliat	ions				
Language Proficie	ncies				
Why are you interested in volunteering at TLH?					
Volunteer Work Objectives (Check all that apply)					
🗆 Learn New Skills		$\Box$ Use Existing Skills			
□ Explore Careers		□ Stay Active			
$\Box$ Meet and Work with People		$\Box$ Fun and Relaxation			
□ Give Back to Community □ Other					
Time Commitment and Availability					
* Minimum number of service hours— six (6) hours per month					
<b>Uniform</b> Shirt size (check c □XS □Small	ne) DMedium DLarge		□XXXL	Blazer Size	
Emergency Contact				_ Relationship _	
Home	Cell	Work	E-mail _		

I understand that my participation as a volunteer ambassador is contingent upon a successful security background check. I have read all of the above and certify that the information provided is true and complete to the best of my knowledge.

Thank you for your interest in participating in the Tallahassee International Airport's Volunteer Ambassador Program. Please e-mail or fax your completed application to Laura Brown at: E-mail: <u>aviationambassadors@talgov.com</u> or FAX: (850) 891-7837.