## Jackson Bickler Foundation - Young Ambassadors Program Application

## **About the Program**

The Jackson Bickler Foundation Young Ambassadors Program is an exciting volunteer opportunity for teens to represent our mission in the community. Young Ambassadors will help at fundraising events, participate in community outreach, and share the spirit of kindness, inclusion, and joy that Jackson lived every day. Participation can be recognized by the National Honor Society (NHS) and on college applications.

| Applicant Information       |
|-----------------------------|
| Full Name:                  |
| Date of Birth:              |
| Age:                        |
| School:                     |
| Grade:                      |
| Home Address:               |
| City/State/Zip:             |
| Phone Number:               |
| Email Address:              |
| Parent/Guardian Information |
| Full Name:                  |
| Phone Number:               |
| Email Address:              |

## **Applicant Questions (Please answer each in 3-5 sentences)**

1. Why do you want to be a Young Ambassador for the Jackson Bickler Foundation?

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|---|--|-----------|
| 2. How do your skills, personality,                       | or experiences make you a good representative of our mission?        |           |
| 3. What does kindness, inclusion, Young Ambassador?       | and community mean to you, and how would you share those val         | lues as a |
| Acknowledgment  |  |           |
| Applicant:  |  |           |
| I understand that as a Young Aml                          | passador for the Jackson Bickler Foundation, I will represent the fo | undation  |
| in a positive manner, volunteer at                        | fundraisers, and participate in community outreach.                  |           |
| Signature:  | Date: / /  |           |
| Parent/Guardian:  |  |           |
| I give permission for my child responsibilities involved. | o participate in the Young Ambassadors Program and unders            | tand the  |
| Signature:  | Date: / /  |           |