



# AMBASSADOR APPLICATION

## College of Arts and Sciences

### General Information

Last Name:					First Name:				M.I.:			
T#:			Cellular Phone: ( )		Other Phone: ( )							
Email:												
Address:					City:				State:		Zip:	
Post-Secondary Schools (Excluding TTU):												

### Academic Information

Current Cumulative TTU GPA:				Projected TTU Graduation Date:			
Classification for Upcoming Fall Semester: ✓ Check Appropriate Box		<input type="checkbox"/> <b>Sophomore</b> (30-59 earned hours)		<input type="checkbox"/> <b>Junior</b> (60-89 earned hours)		<input type="checkbox"/> <b>Senior</b> (90 + earned hours)	
Current Department ✓ Check Appropriate Box		<input type="checkbox"/> Biology <input type="checkbox"/> Wildlife & Fisheries Science <input type="checkbox"/> Chemistry <input type="checkbox"/> Earth Sciences / Geosciences <input type="checkbox"/> English <input type="checkbox"/> Foreign Language		<input type="checkbox"/> History <input type="checkbox"/> Mathematics <input type="checkbox"/> Physics <input type="checkbox"/> Sociology <input type="checkbox"/> Political Science			

### Questions

**Why did you choose your major?**

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**Are you a member of any organization? If so, list the organization or organizations and any offices you hold or held.**

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**Describe a time when you functioned as part of a team, and why you would like to serve as a College of Arts and Sciences Ambassador? Attach an additional page if necessary.**

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**Do you work?** ( ✓ Check Appropriate Boxes)     No     Yes     Full-Time     Part-time

**How many hours per week do you work at your job?** \_\_\_\_\_

**What days are you available to work as an ambassador?**     Mon     Tue     Wed     Thu     Fri     Sat     Sun

**What time of the day(s) are you available?**

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### Authorizations

I authorize representatives of the College of Arts and Sciences Ambassador Program to verify any information given on this application and in my resumé. I affirm that all information provided on this application is truthful and to the best of my ability.

Applicant's Name (Printed) \_\_\_\_\_ Applicant's Signature \_\_\_\_\_ Today's Date \_\_\_\_\_



# AMBASSADOR REFERENCE

## College of Arts and Sciences

\*\*\* A total of 2 References are required for each applicant \*\*\*

Student's Name: \_\_\_\_\_  
(Print)

T#: \_\_\_\_\_

The above student is applying for an Ambassador position with the College of Arts and Sciences. We would appreciate your input on the student's performance as an academic and social role model. Please rate the student by checking the appropriate responses below.

	Poor	Below Average	Average	Above Average	Excellent	Not Observed
Class Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dependability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward scholarship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude toward the university	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic performance in class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptance of responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Citizenship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensitivity to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Reference Name (Print)

\_\_\_\_\_  
Reference Title (Print)

\_\_\_\_\_  
Reference Signature

\*\*\* Please return this Ambassador Reference form in a sealed envelope to Deborah Allen, College of Arts and Sciences, Student Success Center, HEND 202, TTU Box 5142, or scan and email to [ssc@tntech.edu](mailto:ssc@tntech.edu) \*\*\*



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Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Today's Date*

\_\_\_\_\_  
*Reference Name (Print)*

\_\_\_\_\_  
*Reference Title (Print)*

\_\_\_\_\_  
*Reference Signature*

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