



Ambassador Application

Date: _____ Name: _____

Employer: _____

Address: _____

Telephone: _____ Fax: _____

Cell: _____ E-mail: _____

What month were you born? _____

Position Held: _____ Length of time employed by this firm: _____

Occupational Duties: _____

Explain how your employer supports your involvement of your becoming an Ambassador and why :

How flexible is your schedule during the workday? (Monday-Friday, 8-5)

___ Very Flexible ___ Somewhat Flexible * ___ Not Flexible*

*Please explain if somewhat and/or not flexible is selected.

Give your reason(s) for wanting to join the Ambassadors. _____

List other organizations you are currently involved in and positions held if applicable.

Attach your resume and a brief bio with information you would like fellow Ambassadors to know about you. (hobbies, activities, family, etc.).

Provide three business references for us to contact. Include company name, contact name and phone number.

How did you hear about the Ambassador Program?

Additional Comments: _____

Please fill out the above information and return to:

Cedar Rapids Metro Economic Alliance
Attention: Laura Seyfer
501 First St. SE, Cedar Rapids, IA 52401
lseyfer@cedarrapids.org

For office use only: Amb. Exec: _____ Called: _____ Mentor: _____ Badge: _____ Orientation: _____
Polo: _____ MME: _____ Email: _____ Mail Status: _____