



*Hope Ambassadors*

A BREEZE OF HOPE FOUNDATION

## Hope Ambassadors Application

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
University: \_\_\_\_\_ Graduation Date: \_\_\_\_\_  
Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
Phone: \_\_\_\_\_ Address: \_\_\_\_\_

**Why are you interested in becoming a Hope Ambassador?**

**What experience/skills do you have that would make you a good Hope Ambassador?**

**What is your platform of ambassadorship?** (i.e. What is your circle of influence, and what kinds of connections would you like to make? Ex. )

**What goals related to the Hope Ambassadorship do you have for your university?**

**A Breeze of Hope Foundation**  
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