



The SSPC Ambassador Application

Name _____

Company _____ Position _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Have you ever been an Ambassador for any other organization? _____

Do you have the ability, time & resources to perform monthly Ambassador duties?

How many hours do you feel you can honestly give to the committee per month?

Are you able to attend and participate in Chamber events monthly?

Why would you like to become an Ambassador of the SSPC?

What are you looking to gain from this experience?

What experience can you bring to the Ambassador program?

Do you belong to any other organizations and/or committees? If yes, which ones.

Is there anything else you would like to share with us?

Signature _____ Date _____