

Hostos Student Ambassador Program

Requirements:

- Must have a Cumulative GPA of 3.25 or Higher
- Must be enrolled for a minimum of six credits
- Must be willing to commit to 40 hours of community service per semester
- Must be able to attend 40 points worth of mandatory weekly training workshops, retreats and monthly leadership forums
- Must commit to one full year of service with the program
- Must have no record of university disciplinary incidents
- Must have enthusiasm, dependability, maturity, initiative, dedication, ethics, leadership qualities, interpersonal skills and a genuine interest in professional growth and community service.

Documents Needed:

- Application
- Resume
- Two Names of References

Office of Student Leadership Development

450 Grand Concourse, Room C-392, Bronx, New York 10451 (718) 518-6541, StudentLeadershipAcademy@hostos.cuny.edu or jlibfeld@hostos.cuny.edu

2016-2017 Student Ambassador Application Form

(Please Print Clearly)

Address: City State Zip Code Home Phone Mobile Work E-mail:	City State Zip Code
City State Zip Code Home Phone Mobile Work E-mail:	City State Zip Code
City State Zip Code Home Phone Mobile Work E-mail:	City State Zip Code
Home PhoneMobileWork	•
E-mail: (Please Print) Parent/Guardian's Name: In case of emergency, please contact: Emergency phone#:	me Phone Mobile Work
(Please Print) Parent/Guardian's Name: In case of emergency, please contact: Emergency phone#:	
Parent/Guardian's Name: In case of emergency, please contact: Emergency phone#:	
In case of emergency, please contact: Emergency phone#:	
Emergency phone#:	rent/Guardian's Name:
	case of emergency, please contact:
	ergency phone#:
Applicant's Classification (circle one): Freshman Sophomore	plicant's Classification (circle one): Freshman Sophomore
Birthdate: Country of Origin:(Optional)	thdate: Country of Origin:(Optional)
Major: Minor:	jor: Minor:
Cumulative GPA: Expected Date of Graduation:/	mulative GPA: Expected Date of Graduation:/

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Applicant's I	Name:
	(Please Print Clearly) Why would you like to be a member of the Student Leadership Academy?
2)	What skills or qualities do you feel that you possess that will contribute to the Student Ambassador Program?
3)	Are you a member of any clubs or organizations on the Hostos campus? Do you hold any executive positions?
4)	What characteristics do you possess that make you a good leader?
5)	What, if any community service activities have you participated in over the past year?

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All forms must be submitted to C-392 or to Jlibfeld@hostos.cuny.edu.

	(Please print clearly)
*	one number of two references from whom you are requ should be HCC faculty or staff members.
Name:	Phone Number:
NI	Phone Number:

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Recommendation Part 1

Leadership Aca	demy Recommendation Form (To be completed by Applicant's Reference)
Reference for:	
	(Please print name of Ambassador Program applicant.)

The Hostos Student Ambassadors are a select group of students who serve as representative leaders for the college, the City University of New York and the community. They are committed to doing volunteer work and receiving leadership training throughout their time as a member of the program. Because of their commitments they are strong scholarship candidates and may be selected to participate at a variety of leadership themed conferences all over the country.

To be selected as a Student Ambassador is an honor and an excellent opportunity for personal and professional growth. Students who are selected as Ambassadors possess strong interpersonal skills, leadership qualities, a genuine interest in meeting new people, and a sense of school spirit, pride, and knowledge.

Please rate the student in the following categories (1 = lowest, 5 = highest):

Punctuality	1	2	3	4	5
Initiative	1	2	3	4	5
Team Work	1	2	3	4	5
Positive Attitude	1	2	3	4	5
Maturity	1	2	3	4	5
Responsibility	1	2	3	4	5
Communication Skills	1	2	3	4	5
Dependability	1	2	3	4	5
Dedication	1	2	3	4	5
Problem Solving	1	2	3	4	5

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Recomme	ndation Part 2
Applicant's	Name:
	(Please print name of Ambassador Program applicant.)
Please mark	the appropriate space
	[] I highly recommend this student [] I recommend this student
	[] I recommend this student with reservation [] I do not recommend this student
	It is important that additional comments are provided regarding the student's ability to successfully assume the role of a Student Ambassador. Letters of recommendations are preferred.
	Name
	DepartmentTitle
	Office Phone
	How long have you known the student?
	In what capacity do you know the student?
	Please complete this form and email/mail/fax/deliver, along with you <u>CONFIDENTIAL</u> Letter of Recommendation to Office of Student Leadership Development, C-392 – ATTN: Student Ambassador Program