



VALUE THEM BOTH STUDENT AMBASSADOR

APPLICATION

STUDENT NAME:

EMAIL:

MOBILE #:

SCHOOL:

YEAR IN SCHOOL:

PARISH:

WHY WOULD YOU LIKE TO BE A VALUE THEM BOTH STUDENT AMBASSADOR?

WHAT SPECIFIC STRENGTHS DO YOU HAVE THAT WILL BE VALUABLE AS A VTB AMBASSADOR?

AUTHORIZATION/REFERENCES

_____ Student Signature

I am aware that my son/daughter is volunteering for the role as a Value Them Both Student Ambassador during the 2021-22 school year and I am willing to support him/her in this role.

_____ Parent Signature

Recommendation from Priest, Teacher or Youth Group Leader

I recommend the above student to serve as a Value Them Both Student Ambassador. I am confident that he/she is a faithful and responsible individual who will represent the Pro-Life Office and the Catholic Church well as a Value Them Both Student Ambassador.

Name _____ Title _____

_____ Signature

