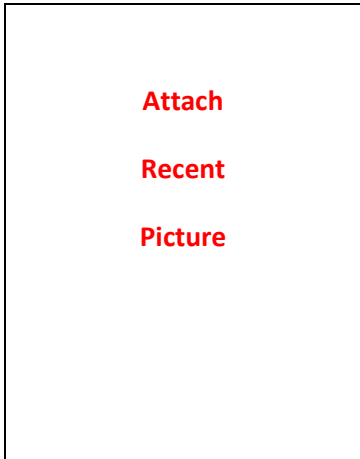




AMBASSADOR APPLICATION



Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_
Last First Middle Preferred Name

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_
E-Mail Address: \_\_\_\_\_

Classification: \_\_\_\_\_ High School Senior \_\_\_\_\_ EMCC Freshman

Please name all high school or college activities that you were or are presently involved in: \_\_\_\_\_

Why do you feel you would be an asset to the EMCC Ambassador team and what special qualifications do you possess? \_\_\_\_\_

Do you agree to abide by the rules and regulations if selected? \_\_\_\_\_ Yes \_\_\_\_\_ No

(Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

Mail or bring this application and a letter of recommendation to:
EMCC-Golden Triangle Campus ATTN: Michael D. Black P.O. Box 100 Mayhew, MS 39753
EMCC-Scooba Campus ATTN: Taylor Ray P.O. Box 158 Scooba, MS 39358

APPLICATION DEADLINE: April 2, 2010
Candidates will be contacted and scheduled for interviews, to be held the week of April 12, 2010.

EMCC does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. Contact Dr. Jackie Stennis with inquiries regarding this policy. 662-476-5000 or jstennis@eastms.edu