



## 2020 GOODWILL AMBASSADOR APPLICATION FORM

Applicant Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

University/College: \_\_\_\_\_

Year in School (if a current student): \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Current employer (if applicable): \_\_\_\_\_

Japanese speaking ability:      FLUENT              MODERATE              MINIMAL      NONE

How did you hear about the Goodwill Ambassador Program?

\_\_\_\_\_

Do you know someone who served as a Goodwill Ambassador? If so, please share his/her name with the Application Review Committee:

\_\_\_\_\_

Have you applied for the Goodwill Ambassador Program in the past?      Y      N

If yes, please indicate when you last applied. \_\_\_\_\_

Please indicate when you are available for an in-person interview (circle all that apply):

Tuesday, December 4                      3-5 PM                      5-7 PM

Wednesday, December 5                      3-5 PM                      5-7 PM

Thursday, December 6                      3-5 PM                      5-7 PM

Recommendation Letter Contact

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Application Deadline: Friday, January 17, 2020**

**Recommendation Letters MUST be received by the Application Deadline**