

2020 Centerstone Ambassador Council Application

Full name: _____ Birth date: _____

Employer: _____ Job Title: _____

Work Email: _____ Work Phone: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Personal Email: _____ Personal Phone: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Why do you want to join the Centerstone Ambassador Council?

What involvement, if any, have you had with Centerstone or other youth-serving agencies?

Have you served on any other nonprofit boards or committees? If so, please list those here.

Which of the below skills or experience do you have? Please check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Academic research | <input type="checkbox"/> Financial management | <input type="checkbox"/> Marketing/communications |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Nonprofit board |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Governmental employee | <input type="checkbox"/> Nonprofit employee |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Grant writing | <input type="checkbox"/> Public speaking |
| <input type="checkbox"/> Banking | <input type="checkbox"/> Graphic design | <input type="checkbox"/> Real estate |
| <input type="checkbox"/> Business management | <input type="checkbox"/> Healthcare | <input type="checkbox"/> Service and volunteering |
| <input type="checkbox"/> Community development | <input type="checkbox"/> Human resources | <input type="checkbox"/> Social media |
| <input type="checkbox"/> Community organizing | <input type="checkbox"/> Investments | <input type="checkbox"/> Strategic planning |
| <input type="checkbox"/> Entrepreneurship | <input type="checkbox"/> IT | <input type="checkbox"/> Writing/journalism |
| <input type="checkbox"/> Event planning | <input type="checkbox"/> Law | |

Please list two professional references below:

Reference 1

Name: _____ Job title: _____
Employer: _____ Email: _____
Phone: _____ Relationship to applicant: _____

Reference 2

Name: _____ Job title: _____
Employer: _____ Email: _____
Phone: _____ Relationship to applicant: _____

We understand that conflicts arise from time to time, but it is our hope that Centerstone will become a rewarding priority for you. In turn, we at Centerstone commit to respecting your time and valuing your input. Please sign below to indicate your commitment to the Ambassador Council.

Name: _____

Signature: _____ Date: _____

Upon completion, please scan and email this application to Missy Fountain at missy.fountain@centerstone.org.
Or, mail it to: Missy Fountain, Advancement Department, Centerstone, 3121 Brooklawn Campus Dr., Louisville, KY 40218.
We will be in touch within two weeks of submission. Thanks again for your interest, commitment, and compassion!
Please call Missy Fountain at (502) 753-5508 if you have questions.



*in
partnership
with*



CENTERSTONE