



AIRPORT AMBASSADOR APPLICATION

NAME:		ADDRESS:	
E-MAIL:		CITY:	
PHONE:		STATE:	ZIP:
HOW DID YOU HEAR ABOUT THE AIRPORT AMBASSADOR PROGRAM?			
DO YOU HAVE ANY PREVIOUS VOLUNTEER EXPERIENCE?			
HOW MANY VOLUNTEER HOURS ARE YOU WILLING TO WORK AT THE AIRPORT PER WEEK?		DO YOU HAVE A TIME PREFERENCE? MORNING, AFTERNOON OR EVENINGS?	
PLEASE TELL US ABOUT YOURSELF AND THE REASON YOU WOULD LIKE TO BECOME AN AMBASSADOR.			
WHAT SIZE JACKET OR BLAZER WOULD YOU REQUIRE? (APPROXIMATE)			
<p align="center"> THANK YOU FOR YOUR INTEREST IN CLEVELAND HOPKINS INTERNATIONAL AIRPORT! IF YOU HAVE ANY ADDITIONAL QUESTIONS PLEASE CONTACT ME AT 216-265-6006 OR ywhisenant@clevelandairport.com </p> <p align="center"> Yvette Whisenant Manager, Customer Service Cleveland Hopkins International Airport P.O. Box 81009 Cleveland, Ohio 44181-0009 </p>			

Cleveland Hopkins International Airport (CLE)
Airport Ambassador Personal Reference Check Form

Please list three (3) individuals who may be contacted as personal references:

Reference Name: _____

Address: _____ State: _____ Zip: _____

E-mail Address: _____

Relationship to Applicant: _____

Reference Name: _____

Address: _____ State: _____ Zip: _____

E-mail Address: _____

Relationship to Applicant: _____

Reference Name: _____

Address: _____ State: _____ Zip: _____

E-mail Address: _____

Relationship to Applicant: _____