

Wharton ISD Ambassadors Program Application for Enrollment 2016-2017

Goal: To educate a group of community members (ambassadors) regarding the programs and opportunities currently offered in Wharton ISD. These ambassadors will then have current and accurate information about the Wharton public schools to share within the community.

- All applications for enrollment in the WISD ambassadors program must be completed and returned to the Wharton ISD Administration office, 2100 N Fulton, Wharton, Texas 77488 no later October 3, 2016.
- Your signature at the bottom of this application authorizes Wharton ISD to complete a criminal background check which is required for participation in this program.
- Applicants must be 18 years of age or older to be considered.
- Applicants will be notified of acceptance by October 6, 2016. Sessions for the Wharton ISD District Ambassadors are scheduled to begin at 6:00 PM – 7:30 PM at Wharton Elementary School on the following Thursdays: October 13, November 17, January 12, February 9 and April 20.
- For more information, please contact **Linda Lins at llins@whartonisd.net or 979-532-6201.**

Date of Application _____

Name _____

Address (include P.O. Box if applicable) _____

Preferred Phone _____

Alternate Phone _____

Email _____

Name and phone number of person to contact in case of emergency:

Name _____

Phone _____

Relationship _____

Please list any current or past involvement with the Wharton schools:
(parent, volunteer, school board member, employee, guest speaker, PTO officer, attendee at school board meetings, etc. . .)

What do you hope to learn from participating in this program and how do you anticipate using this information?

Yes No I am able to commit to attending and participating in all sessions.

Yes No I understand that acceptance into the WISD Ambassadors Program is for myself only and I will not be able to bring children or other guests to the sessions.

Please provide the WISD with the following information so that we may complete a background check as part of the application process.

The state in which your driver's license was issued _____

Your driver's license number _____

Your date of birth _____

Full, legal name (Please print clearly) _____

Signature of Applicant: _____

Please complete this application and return to:

*Wharton ISD
Attn. Linda Lins
2100 N. Fulton
Wharton, Texas 77488*