



Junior Ambassadors Timeline for New Students 2019-2020

Date	Description
September 16	Deadline for BPA Education Department to receive application packet
September 30	Orientation (Light Supper will be served)*
October – April	JAs must complete a minimum of two ushering assignments per month (14 total) and attend three seminars
October 5	Seminar 1: Customer Service Training*
November 2	Seminar 2
December 7	Seminar 3
January 11	Seminar 4
January 25	Social
February 1	Seminar 5
March 7	Seminar 6
April 4	Seminar 7
April 27	Awards Banquet

***The September 30 Orientation and October 5 Seminar are MANDATORY. If you are not able to attend these events, please let us know.**



Junior Ambassadors Program 2019-2020

Application Information

**Application Deadline:
Monday, September 16**

All completed applications must be received by Monday, September 16.



Check List:

- _____ **Completed application form**
- _____ **Personal essay (one page or less)**
- _____ **Proof of final grades from previous school year (include GPA)**
- _____ **Recommendation forms completed by two teachers, guidance counselors, employers, and/or youth leaders**
- _____ **Parental permission and consent**

Please complete and return the enclosed application materials to:

**Blumenthal Performing Arts
Attn: Education Department
345 North College Street | Charlotte, NC
28202**

Fax: 704.444.2076
educationdepartment@blumenthalarts.org

Questions: 704.348.5770

Applications may be mailed, scanned, faxed, or dropped off
at Guest Services at the College Street entrance to Spirit Square (345 N. College).



Junior Ambassadors Program 2019 - 2020

Typed Applications are preferred.

PERSONAL INFORMATION

Applicant's Name: _____
First Middle Last

Permanent Address: _____

City State Zip Code

Email Address: _____ Phone: _____

Date of Birth: _____ Nickname (if any): _____

Parent/Guardian: _____ Work Phone: _____

Email Address: _____ Cell/Home: _____

SCHOOL INFORMATION

High School Currently Attending: _____

Grade Level 2019 - 2020: _____ (must be a junior or senior, 16-18 years of age)

School Phone: _____ School Counselor: _____

Cumulative GPA: _____ Career Goal: _____

List extracurricular activities (school and community):

PERSONAL ESSAY

Please answer the following questions in your personal essay: (1) How have the arts impacted your life? (2) Discuss the importance of community service. **The essay must be typed, double spaced, in 12-pt font, and be one page or less in length.**

Applicant Signature

Date



Junior Ambassadors Program 2019 – 2020

Legal Parent/Guardian Consent Form

- I, _____, as the legal parent/guardian of _____
_____ give permission for him/her to volunteer as a Junior Ambassador for Blumenthal Performing Arts. I do not hold Blumenthal Performing Arts liable or responsible for any lost personal belongings or for any injury that may occur during his/her volunteer service or activity participation.
- I will be responsible for providing reliable transportation to and from Blumenthal venues when he/she is scheduled to volunteer and participate in seminars or special activities.
- I will be responsible for providing insurance and assuming responsibility for all injuries and expenses that may result while he/she is providing volunteer services or participating in activities at Blumenthal Performing Arts.

PARENTAL CONSENT - Please check one of the following:

- _____ I do consent to allowing my teenager to volunteer usher at performances that include adult content.
- _____ I do **not** consent to allowing my teenager to volunteer usher performances that include adult content.

Please Note:

- Completing an application does not guarantee selection.
- Students will be thoughtfully selected from all eligible applicants.
- Students who do not continue to meet the ushering and seminar attendance requirements of the program may be terminated from the program at any time.

Parent/Guardian Signature

Date



Junior Ambassadors Program 2019 – 20120

EMERGENCY CONTACTS

Name: _____

Name: _____

Relationship: _____

Relationship: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

Physician Name: _____ Physician Phone: _____

Physician Address: _____

Hospital Preference: _____

Are you able to perform the essential functions of this position, with or without accommodation? Junior Ambassadors must be able to stand for long periods of time, climb stairs to all levels of our theaters, and read tickets in dim lighting. If accommodations are needed, please describe below. If you have any concerns about these tasks, contact Eric Figueroa at EFigueroa@blumenthalarts.org or Jenny Kabool at JKabool@blumenthalarts.org.

Allergies, medical conditions, severe illnesses: _____

I certify that all of the information provided in this application is true and correct to the best of my knowledge.

Signature _____

Date _____



Junior Ambassadors Program 2019 - 2020

Recommendation Form

To Be Completed By Applicant

Name: _____ Grade: _____

School: _____ Graduation Date/Year: _____

To Be Completed By Individual Recommending Applicant

Thank you for taking time to assist Blumenthal Performing Arts with the selection of Junior Ambassadors for our 2019-2020 performance season. We highly value your remarks and will hold your comments in confidence. Please return this completed form to the applicant in a signed and sealed envelope.

What is your relationship to the applicant? (*Check one*)

Teacher _____ Employer _____ Advisor/Youth Leader _____

Other (specify): _____

How long have you known the applicant? _____

Please place a check in the column that most clearly represents your opinion of the applicant:

	Superior	Good	Average	Poor	Unknown
Ability to work with others					
Ability to take directions					
Maturity and ability to work under pressure					
Responsibility					
Self-discipline					
Reliability					
Motivation					

☐ Strongly Recommend ☐ Recommend ☐ Recommend with Reservations ☐ Do Not Recommend

Please add any comments regarding your recommendation for this student to the Junior Ambassadors program:

Signature _____

Date _____



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