

# D.R.E.A.M. Transition Program Ambassador Application

"If yo<mark>u can D.R.E.A.M. it, you can Believe it, and if you can Believe it, you can Achieve it!"</mark>

D.R.E.A.M. Ambassador Potential Applicants Material

All documents must be completed & submitted back via email or brought in person by the deadlines presented on page 3 to:

Olivia St. John
Accessibility Specialist/DREAM Supervisor
ostjohn@newhaven.edu

If you have any further questions, please Contact Accessibility Resources Center: <a href="mailto:arc@newhaven.edu">arc@newhaven.edu</a> or 203-932-7332

**Promptness is key to the D.R.E.A.M. Ambassador Team.** Here is an outline of every item that must be submitted via Outlook to Olivia St. John, ostjohn@newhaven.edu or dropped off to Accessibility Resources Center – located on the backside of Sheffield Hall, across from Gazebo.

#### **Item Explanations:**

- Requirements Signature Form
  - This is due on <u>TBD</u>
  - This item entails a signature acknowledging the expectations and requirements of being a D.R.E.A.M. Ambassador.
- D.R.E.A.M. Ambassador Application
  - This item is due on TBD
  - This item entails and application with questions answered in full, and proofread.
- References (2)
  - This item is due on <u>TBD</u>
  - This item entails two references with answers be submitted from <u>2</u> other people of your choosing (professor, employer, etc.)

## **Expectations/Requirements Acknowledgement Signature Page:**

- Must be a Rising Sophomore or higher at the University of New Haven and expected to be enrolled the following semester/year
- Must maintain a 2.7 Cumulative GPA or higher
- Must attend required training.
- Must be available to attend and fully participate in D.R.E.A.M. Transition Program
- Must be willing to remain active with ARC and ARC Programming throughout the academic year, following D.R.E.A.M.

I,, by virtue	of signing this page, hereby agree to the
above-mentioned regulations regarding the appl regulations are subject to change at the discretio Accessibility Resource Center.	
Signature:	Date:

An essential component of the DREAM Ambassador hiring process, this application must be filled out in its entirety. Once received, the appropriate person(s) will contact for an interview. Please fill out each article with complete respect and **honesty**. Our goal is to help you identify your strengths, help you be the best leader you can be, and to strive towards your ultimate accomplishment: Being a D.R.E.A.M. Ambassador. \*\*Please provide a resume (optional) and two references (mandatory) along with this application to the Accessibility Resources Center. You may drop off the necessary documents in person, or by submitting electronically to ostjohn@newhaven.edu \*\*

Name:_	:Date:	
	ct Number: () ct Email:	
Current	nt Class Ranking:	
	Freshman	
	□ Sophomore □ Sop	
	Sophomore  Junior  Sopior	A
4	□ Senior □	3
Major:		23
Did you	ou attend the D.R.E.A.M. Orientation as a new student?	T.G
	□ Yes	~
	□ No	
Have yo	you been a D.R.E.A.M. Ambassador in the past?	
	□ Yes	
П	ΠΝο	

Why do	you want to be a	D.R.E.A.M.	Ambassador?
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What Makes you the most qualified student for this position?

What does being a part of a team mean to you?

How do you handle Constructive Criticism?

What time commitments/extra curriculars do you participate in currently? (Soccer, theater, Work, etc.):

Do you have questions and or concerns?

#### **D.R.E.A.M. Ambassador Reference Form 1- Page A**

Reference Name:
D.R.E.A.M. Ambassador Applicant Name:
How I Know this Applicant:
Please E-Mail this evaluation directly to <u>ostjohn@newhaven.edu</u> .
This student is requesting a reference to fulfill the D.R.E.A.M. Ambassador application requirement through ARC. Our sole intent in their request to disclose this important information is to gain a significant understanding of the applicant. This is to ensure that the D.R.E.A.M. Team is equipped with excellen diligent, reliable, students. May you please answer each question in its entirety and in by doing so, highlight the Applicant's accomplishments, programs, and character.
All disclo <mark>sed informati</mark> on will be kept in confidence between the applicant, requeste <mark>d refere</mark> nce an ARC. If you have any questions of concerns, p <mark>lease</mark> reach out to Accessibility Resources Center a dreamorientation@newhaven.edu or by contacting DREAM Supervisor, Olivia St. John directly a postjohn@newhaven.edu.
Please type answers on the second page of this document. *

#### D.R.E.A.M. Ambassador Reference Form 1- Page B

1. May you please describe why this applicant would make a strong D.R.E.A.M. Ambassador and role model:

2. Please describe in detail the strengths and weaknesses of this applicant.

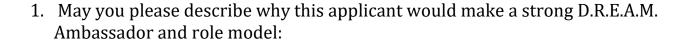
3. How well does this applicant work well with others in a group setting?

4. Do you have any concerns about this applicant holding a leadership position?

#### D.R.E.A.M. Ambassador Reference Form 2- Page A

Reference Name:	
D.R.E.A.M. Ambassador Applicant Name:	
How I Know this Applicant:	
Please E-Mail this evaluation directly to <u>ostjohn@newhaven.edu</u> .	
This student is requesting a reference to fulfill the D.R.E.A.M. Ambassador application requirem through ARC. Our sole intent in their request to disclose this important information is to gain a significant understanding of the applicant. This is to ensure that the D.R.E.A.M. Team is equipped with excel diligent, reliable, students. May you please answer each question in its entirety and in by doing so, high the Applicant's accomplishments, programs, and character.	ican llent
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*Please type answers on the second page of this document. *	11/1/1

#### D.R.E.A.M. Ambassador Reference Form 2 - Page B



2. Please describe in detail the strengths and weaknesses of this applicant.

3. How well does this applicant work well with others in a group setting?

4. Do you have any concerns about this applicant holding a leadership position?