



Ambassador Training Recommendation

Ambassador Program

Best Buddies Ambassador trainings are classes that provide training for participants with and without intellectual and developmental disabilities (IDD) in areas of speech writing, public speaking, and self-advocacy. Ambassadors develop the skills to professionally share their life stories, promote Best Buddies programs, network, and most importantly, advocate. The ambassador trainings prepare people to become active agents of change and informed, engaging advocates for the disability rights movement.

Section 1: Ambassador Information

First Name:	Last Name:
Email:	Phone:
Best Buddies Staff Contact:	Best Buddies Office:

Best Buddies programs ambassador is currently involved in *(mark all that apply)*:

Ambassadors	Citizens	Colleges
e-Buddies	High Schools	Jobs

Best Buddies Ambassadors Experience

Has the ambassador completed any previous Best Buddies ambassador trainings? YES NO

If yes, where was the training completed *(mark all that apply)*?

Individual training by BB staff Leadership Conference Local group training by BB staff Other:

Has the ambassador completed public speaking or leadership training outside of Best Buddies? YES NO

Has the ambassador spoken for Best Buddies or another organization? If yes, list a few? YES NO

Educational Style

Please indicate the ambassador's comfort level and ability with read:

High Confidence Comfortable Moderate Not comfortable Cannot read

Please indicate the ambassador's comfort level and ability with writing:

High Confidence Comfortable Moderate Not comfortable Cannot write

Does the ambassador use any special devices to help him/her communicate? If so, what type?



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Section 2: Recommendation

For the ambassador you are recommending, what do you hope for them to get out of the training?

To make the training a success for the ambassador you are recommending, is there anything the facilitator or speech coach needs to know to help them with their speech or in the classroom?

Recommendation from (please provide your first and last name):

Relationship to Ambassador:

Email:

Phone:

Signature: _____ Date: _____