

THE COLORADO OCEAN COALITION
2015 OCEAN AMBASSADOR CERTIFICATION PROGRAM

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: _____ Other Phone: _____

Email Address: _____

Birth date (mm/dd/yyyy): _____

Education Background (level completed, where you attended school, degree(s) if applicable, and area of study)

Current Profession/Place of Employment: _____

List three of your main hobbies or interests: _____

On a separate document, please describe a time when you saw a long-term project or commitment through to the end and what challenges you might have had to overcome to do so _____

As an OA candidate I can commit to...

- Attend 41 hours of scheduled training as laid out on the OA webpage at www.coloradoocean.org/ocean-ambassador-program/ in the *2015 Training Schedule* tab (please email the address below if you have a schedule conflict)
- Fulfill all of the *Requirements and Commitments* of the program as outlined on the OA webpage (link listed above)
- To be an active participant of the COCO community at events, fundraisers, socials and OA gatherings throughout your year as an OA Candidate (and hopefully beyond!)

My signature below indicates that I agree that all of the above information is true:

Signature

Date

Printed Name