



AUBURN  
UNIVERSITY

SCHOOL OF NURSING

# AUSON Student Ambassador Request Form

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Requestor Name

Requestor E-mail Address

Requestor Phone Number

Name of Event

Date of Event

Time of Event

Event Location

Number of Ambassadors Needed

Requested Attire

Polo

Business Dress

Time Ambassadors Should Arrive

Time Ambassadors Should Depart

What are the expectations of the Ambassadors at this event?

You will be notified if Ambassadors are able to attend your event.

Contact Stephanie Wood ([stephaniewood@auburn.edu](mailto:stephaniewood@auburn.edu)) with any additional questions or comments.