

Dolphin Ambassadors

DHHS Peer Leadership for New Students

Inspired by: Kristin Stone

Organized by PTSA: Stephanie Lenthall, Melina Pellini and Mercedes Wagner

Mission

To expand student's educational experience by encouraging involvement in positive and healthy co-curricular activities, which will build strong relationships between students, provide leadership opportunities, increase self-confidence, and empower students to create valuable change.

To provide a mentoring program to support new DHHS students and their families.

To provide social opportunities, lunchtime companionship and engagement during new students' first year at DHHS.

To provide information meetings to new families on the ongoing programs and opportunities at DHHS.

To promote DHHS activities and enrich students' lives.

To increase leadership skills by providing quality services and additional support to the DHHS and community.

Important Dates

Monthly Zoom/In-person (when allowed) meetings

Monthly social events/activities

*Questions please email Melina Pellini or Stephanie Lenthall at dolphinambassador@gmail.com

Dolphin Ambassador Application

The Dana Hills High School PTSA Dolphin Ambassador Program is searching for qualified, enthusiastic, committed student leaders who will volunteer to serve as role models and mentors to new incoming students to DHHS. As a Dolphin Ambassador, you will serve on student outreach, new student orientation and social support teams by interacting with new students, and their families to ensure the proper transition of these students into DHHS.

We are specifically looking for empathetic, caring individuals who feel comfortable engaging with fellow students in social settings and can mentor as these students become adjusted to the DHHS community.

If you are interested in becoming a Dolphin Ambassador please fill out this application and return to the PTSA mailbox located in the DHHS office or email to dolphinambassador@gmail.com

Qualified applicants will be contacted. All Dolphin Ambassadors are required to be members of the Dana Hill High School PTSA.

Name:

First	MI	Last
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Home Address: _____

Grade: _____ Member of PTSA? _____

Personal E-mail address: _____

Contact Number: Home: _____ Cell: _____

Middle School you attended prior to DHHS: _____

Are you currently on academic or disciplinary probation? Yes ____ No ____

Do you speak another language besides English? _____

Member of any clubs or sports on campus (please list):

Why are you interested in the Student Ambassador Program? What do you think are the most important characteristics of an Ambassador?

How can Student Ambassadors improve the daily life for new students at DHHS?

What are your past experience(s) as a leader, mentor, or team member and how will it strengthen your role as an Ambassador? Do you have any unique interests or hobbies?

How can Student Ambassadors build a sense of community on campus?

I grant permission to be contacted by the PTSA for the PTSA Committee to review my academic and disciplinary records in order to verify accuracy of the information on my application.

Student Signature: _____ Date: _____

Dolphin Ambassador Declaration of Commitment:

I attest that I:

- Am a member of DHHS PTSA
- Will participate in New Student Orientation and Registration in August
- Will meet responsibilities of the Dolphin Ambassador Program and volunteer for campus and community events.
- Will check for communication (texts, emails, apps) daily.
- Commit to at least one academic year
- Will participate in Student Ambassador monthly Lunch Hours, and Dolphin Socials.
- Will represent Dolphin Ambassadors in a responsible and professional manner at all times.
- Will promote DA events and help incoming students become more engaged in DHHS.
- Recognize that being selected as a Dolphin Ambassador is a privilege and honor. If I meet the criteria for selection and agree to the responsibilities expected I promise to fulfill to the best of my abilities the commitments and obligations expected of me.
- Grant permission to be contacted by the PTSA for interviews and for my name and photo(s) to be used in media articles for PTSA related events. I grant permission for the PTSA Committee to review my academic and disciplinary records to verify accuracy of the information on my application.

Student Name: _____

Student Signature: _____ Date: _____

Parent Name (printed) _____

Parent Signature _____ Date: _____