



Dave Batten Alumni Program

Application Form

Please fill out, download, and email form to dreams@shinefoundation.ca

First and last name

Your pronouns

She/her

He/him

Current address

They/them

Other

Telephone number

Which position are you applying for?

Ambassador

Email address

Mentor

What is your preferred method of communication to receive information from Shine about your application?

Phone

Text

Email

Are you willing to travel to another city in your province to assist with a Dream presentation?

Yes

Yes, if within an hour of where I live

No



Are you comfortable with public speaking?

Yes

Sometimes

No

Would you be open to speaking with the media about Shine and your experience?

Yes

Sometimes

No

Are you comfortable representing Shine on your own social media through personal videos and posts, and reposts of Shine's content?

Yes

Sometimes

No

Please describe why you would be a good fit for an Ambassador or Mentor role.

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