Greater Cleveland Food Bank

STUDENT AMBASSADOR PROGRAM

SCHOOL AUTHORIZATION

I support this student's participation in the 2026/2027 Student Ambassador Program.

This Student is enrolled in _____

High School in _____ County.

I understand that the expectation is that the student will encourage fellow high school students to get involved in the fight against hunger through, among other things, volunteering, creating an awareness campaign, organizing a food/funds drive, and engaging friends, family, and community members.

I understand that students who serve as a Student Ambassador are provided the opportunity to give back to the community, increase their network, build leadership skills, and accrue community service hours.

Student Name _____

Principal or Vice Principal's Name _____

Date _____

Principal or Vice Principal Signature _____

Each participating school will need to designate a staff member to be point person or supervisor for the GCFB Student Ambassador Program. This point person will be expected to help students execute their advocacy project by coordinating with the school.

Supervisor's Name _____ Title _____

Supervisor's Phone _____ Email _____

Supervisor's Signature _____

CONTACT US TO LEARN MORE

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GreaterClevelandFoodBank.org

LOCAL COORDINATOR HARVEST FOR HUNGER | MEMBER OF FEEDING AMERICA OHIO ASSOCIATION OF FOODBANKS