



# CTE Ambassador Volunteer Hour Tracking and Verification Form

CTE Ambassador \_\_\_\_\_ (your name) has completed volunteer hours as part of the CTE Ambassador program with Everett Public Schools by participating in the following events:

Student ID:		Grade:		School: Circle one- CHS EHS JHS SHS	
Event Date	Event Title	Your Role	Hours Completed	CTE Admin Signature	

CTE Ambassador Name and Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CTE DEPARTMENT ONLY**

- ☐ The student above has completed a total of \_\_\_\_\_ volunteer hours supporting the CTE department
- ☐ The student above has earned their CTE Ambassador volunteer honor cords
- ☐ The student above is invited to join us again as an ambassador in the following school year

CTE Director Name and Signature: \_\_\_\_\_ Date: \_\_\_\_\_