Application Form
WSG Ambassador Program

1. Personal Information
Full Name:
Email Address:
Phone Number:
Year of Graduation / Field of Study at WSG:

2. Professional Experience and Activity
Current Position / Industry:
Previous Professional Experience: (brief description)

3. Motivation and Goals
Why do you want to become a WSG Ambassador?
What initiatives or activities would you like to carry out as part of the program?
Your strengths and skills that could be useful in the role of Ambassador:

4. Preferred Forms of Engagement
(Please check all that apply)
☐ Participation in university and industry events
☐ Inspirational talks and panel discussions
☐ Creating content about WSG on social media
☐ Supporting promotional and recruitment initiatives
☐ Mentoring students and career consultations
☐ Other suggestions: _____

5. Consent and Confirmation
☐ I consent to the processing of my personal data for the purpose of implementing the WSG Ambassador Program.
☐ I confirm that I have read and accept the Terms and Conditions of the Program.

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date and signature

How to submit the form:
Completed forms should be sent to: **absolwent@byd.pl**