



**Ronald McDonald  
House Charities®**  
Greater Washington, DC

Keeping families close®

**TEEN AMBASSADOR PROGRAM**  
High School Guidance Counselor Approval Letter

The mission of Ronald McDonald House Charities of Greater Washington, DC is to ease the hardship of children's illness on families through three programs that improve the health and wellbeing of children. Many activities and services provided by RMHCDC are possible only because of the help of volunteers and programs such as the Teen Ambassadors. The purpose of our Teen Ambassador Program is: to encourage High School students to become more active in community service, to create an awareness of Ronald McDonald House Charities of Greater Washington, DC in the student's school and community, and to encourage support for RMHCDC.

The student indicated below has applied for a Teen Ambassador position at Ronald McDonald House Charities of Greater Washington, DC. We will be interviewing this individual as a possible Teen Ambassador, and we would appreciate your help in this process.

Name of Applicant:						
How long have you known this student and in what context?						
<input type="checkbox"/> I acknowledge this applicant is a student in good standing with no academic probation, and behavior has been in accordance with our school's code of conduct.						
<input type="checkbox"/> I understand this student will be expected to be a role model for other students in our school and from other local schools.						
<input type="checkbox"/> I understand this student will be expected to engage in leadership activities including requesting the help of clubs or teams in our school to assist RMHC. I also realize this student's participation as a Teen Ambassador will not be affected if our schools clubs or teams are not able to help.						
Please write whatever you think is important about this student, including a description of academic, extracurricular, and personal characteristics. We welcome a broad-based assessment. Feel free to attach other materials you may have prepared on this student's behalf, if applicable.						
I recommend this student:		No basis		With reservation		Fairly strongly
Guidance Counselor Name						
School Name						
Phone Number				Counselor's E-Mail		
Signature				Date		

**Please send completed reference form electronically (Sign and scan as PDF) via email to the following email address: [TAP@rmhcdc.org](mailto:TAP@rmhcdc.org) (preferred) or in a sealed envelope with your signature across the seal, and return it to the applicant as soon as possible.**

Thank you for your support of this student's community service. For any questions, please contact the RMHCDC board liaisons for this program at [TAP@rmhcdc.org](mailto:TAP@rmhcdc.org).