

YOUTH MILLENNIUM DEVELOPMENT AMBASSADOR INITIATIVE

C/o: Inter Secondary Schools Leadership Council (ISSL Council) Sierra Leone
16 Pyne Street, Circular Road, Freetown, Sierra Leone, West Africa.
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YOUTH LEADERSHIP ENTRY FORM

PERSONAL INFORMATION

First Name: _____

Last Name: _____

Date of Birth: _____

Sex: F M

Nationality: _____

Religion: _____

E-mail: _____

Contact Cell Numbers: _____

Address: _____

Postal Code: _____

City: _____

District: _____

ORGANIZATION INFORMATION (If any)

Organization Name: _____

Position in the Organization: _____

Name of President/ Executive Director/ Coordinator: _____

Title: _____

Web Site: _____

E-mail: _____

Address: _____

Postal Code: _____

City: _____

District: _____

EDUCATIONAL BACKGROUND

Primary School: _____

From: _____

To: _____

Secondary School: _____

From: _____

To: _____

College/Tertiary Institution: _____

From: _____

To: _____

Present Status: _____

Experience in Youth Events/Activities:

Personal/Work experience relating to Youth issues and engagement:



Why are you interested in becoming an Ambassador for MDGs?

What are your expectations of becoming a Youth Millennium Development Ambassador?

Date:.....

Signature.....

FOR OFFICIAL COMMENT ONLY