

# Student Ambassadors

## School Visit Form

Please fill out the information below and e-mail this form to [tclover@salud.unm.edu](mailto:tclover@salud.unm.edu). *In order for this assignment to be counted towards your Volunteer Hours, your information must meet requirements given during the orientation session.*

### Basic Info:

Your name \_\_\_\_\_

Name of high school \_\_\_\_\_

Date of school visit. \_\_\_\_\_

Start and end time of school visit. \_\_\_\_\_

Estimated # of students present at school visit. \_\_\_\_\_

Contact information for teacher/counselor/staff who arranged your visit.

Name \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

### Presentation Evaluation:

What went well? Write a paragraph describing a few things that went particularly well during your presentation and explain why.

What would you change in the future? Write a paragraph describing a few things you could change the next time you present and explain why.