

## **Peer Educator Application**

Today's Date:				
I. Personal Information				
Last name:	First name:		M.I.:	
Address:		City:		
State:		Zip:		
State.		Δ1μ.		
Empl ID #:		Cell Phone #:		
Preferred E-Mail Address:				
		ophomore DJunior	□Senior	
Credits Completed:		Expected Date of Graduation:		
Current GPA:		Major/Minor:		
Common Const.				
Career Goal:				
II. Work History				
Please list any history of work experience (paid or unpaid).				
Past Employer(s):		Current Employer(s):		

## III. Record of Involvement

Please list any organizations/activities in which you have been involved.

Past Involvement:	Current Involvement including at CCI		
rast involvement.	Current Involvement, including at CSI:		
IV. Please answer the following questions.			
1. How did you hear about the Door Education program?			
1. How did you hear about the Peer Education program?			
2. Why are you interested in being a Health & Wellness Peer Educator?			
3. What qualities and skills do you possess that would make you a good candidate?			
A Militar taning or income and the control of	in addunating if the company Deau Education?		
4. Which topics or issues are you most interested	in addressing it chosen as a Peer Educator?		
5. In your opinion, what are the health issues of gr	reatest concern for college students?		