



PEER MENTOR APPLICATION

Thank you for your interest in becoming a Peer Mentor at Howard College. You may have the opportunity and privilege to encourage, engage and support students as they begin their educational journey. All applicants must have an endorsement from their LEADS Coach.

PERSONAL DATA – PLEASE PRINT

Student ID #:		
Last Name	First Name	Middle Initial
Position Interest: <input type="checkbox"/> New Peer Mentor <input type="checkbox"/> Returning Mentor		Semester: 2019-2020
Phone Number:		Email:
Best Contact? <input type="checkbox"/> PHONE <input type="checkbox"/> EMAIL	Highest Degree Attained:	
Current Location: <input type="checkbox"/> Big Spring <input type="checkbox"/> Lamesa <input type="checkbox"/> San Angelo <input type="checkbox"/> SWCID		Program of Study:
Earned Credit Hours:		Cumulative GPA:
Area(s) of Interest: <input type="checkbox"/> Health Sciences <input type="checkbox"/> Business/Industry <input type="checkbox"/> Arts/Humanities <input type="checkbox"/> STEM <input type="checkbox"/> Public Service <input type="checkbox"/> Undecided		
<i>If selected, Peer Mentor must participate in all training activities and meetings. Including those required outside of the regular academic schedule. Peer Mentor must have satisfactory attendance.</i>		
Have you read the description of the position you are applying for? <input type="checkbox"/> YES <input type="checkbox"/> NO		

ESSAY QUESTIONS – USE SUPPLEMENTAL SHEETS IF NEEDED.

Please provide a brief summary of your experience in the HC LEADS program.
Please explain your interest in being a Peer Mentor in the HC Leads program.
In your own words, define the role of a Peer Mentor.

Describe your greatest strength(s) applicable to being a Peer Mentor.

List any *anticipated activities/employment* for the work semester identified on page 1.

List any activities you are currently involved in or have been in the past at Howard College/SWCID.

Please list any specialized training or certificates.

HC LEADS COACH ENDORSEMENT

AS SUPERVISOR OF THIS APPLICANT, I SUPPORT HIS/HER QUEST TO SERVE AS A COACH/MENTOR.

HC LEADS Coach Printed Name

HC LEADS Coach Signature

Date

AGREEMENT

I CERTIFY THAT ALL OF THE INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. IF SELECTED FOR THE ROLE OF PEER MENTOR, I AGREE TO COMPLETE ALL MANDATORY TRAINING BEFORE STARTING THE POSITION.

Applicant Signature

Date