

Coastal Carolina University  
First-Year Experience  
Peer Leader Program Application  
Application Deadline: February 6, 2012

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Local Address: \_\_\_\_\_

Cell/CCU Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Current Cumulative GPA: \_\_\_\_\_

Academic standing next fall semester: \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior

Academic Major: \_\_\_\_\_

As a freshman, did you take a first-year seminar/UNIV 110? \_\_\_ Yes \_\_\_ No

Please list your campus and community involvement activities (including honors, awards, leadership positions, and organizations you are a member of).

Please list below the names of two University references (professors, staff, and/or administrators).

	Name	Position	Campus Telephone	Campus Email
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____

Recruited by: \_\_\_\_\_

All information provided on this application is true and complete to the best of my knowledge. I understand that in connection with the application process First-Year Experience Peer Leader Program at CCU may request information from my references and CCU, including my Judicial Affairs record at CCU. I authorize and consent to this release as it applies to the application process consistent with state and federal laws.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this application to the First-Year Advising Center, Prince Building 213F.