



Application to Become a SHORE Peer Educator

First Name: _____ **MI:** ____ **Last Name:** _____

Current Address: _____

Phone Number: _____ **Email:** _____@coastal.edu

Current Classification (Fresh, Soph, Jr. Sr): _____ **Expected Graduation date:** _____

Major: _____ **Minor:** _____ **GPA:** _____

Campus Organization/Club Affiliations. Please list any leadership positions you currently hold:

Current campus employment: Yes/No If yes, where: _____

Current off campus employment: Yes/No If yes, where: _____

List personal qualities you possess which would make you an effective Peer Educator? Please include any related training/experiences or education you may have:

Wellness topics of interest: (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Nutrition | <input type="checkbox"/> Healthy relationships |
| <input type="checkbox"/> Alcohol/Other Drugs | <input type="checkbox"/> Body Image/Eating disorders |
| <input type="checkbox"/> Interpersonal Violence | <input type="checkbox"/> Fitness/Exercise |
| <input type="checkbox"/> Tobacco/vaping cessation | <input type="checkbox"/> Suicide prevention |
| <input type="checkbox"/> Stress management | <input type="checkbox"/> Sex/Sexual/Reproductive health/STI Prevention |
| <input type="checkbox"/> Bystander intervention | <input type="checkbox"/> Sleep health |
| <input type="checkbox"/> Recovery | <input type="checkbox"/> Other: |

List any experience presenting to small, medium, or large groups: _____

What are the top health challenges facing college students that you are most passionate about? Why? _____

If you could change one thing at CCU to better support student health and well-being, what would it be? _____

Please list any special skills:

Office/Clerical: _____

Microsoft Word: _____ PowerPoint: _____ Excel: _____ Publisher: _____

Photoshop: _____ Adobe: _____ Canva: _____ Other: _____

Social Media Experience: _____

Are you able to commit to five (5) hours per week? _____ Yes _____ No

Work/Volunteer Experience (Company name/date/role)

1. _____

2. _____

3. _____

How did you hear about the SHORE Peer Educators? _____

Please list the names of two faculty members you have requested as references:

1. _____ 2. _____

Please return completed application to Chris Donevant-Haines cdhaines@coastal.edu

Application deadline: January 19, 2024