**UMBC’s Peer Health Education Program**
**University Health Services**

The Peer Health Education program is made up of undergraduate students from a wide range of academic backgrounds. The Peers are requested to go around campus to residence halls, classrooms, and student organizations to give presentations on different health topics pertaining to college students (e.g. mental health, alcohol & drug use, nutrition, safer sex, etc). The Peers also participate in a variety of events on campus by the request of other departments or events sponsored by University Health Services (e.g. tabling in The Commons for an awareness month or week).

Aside from the main work that you would do as a Peer Health Educator, this program is also a great opportunity for you to build upon your public speaking skills, enhance your interpersonal communication skills, meet new people from across campus, network with different student organizations and departments, master your team-building skills, learning program development skills, add a valuable piece to your resume/CV, and have fun while learning!

Each student in the program will be a volunteer. Please note that as an incoming peer you are required to attend a week long training where you will be trained on all of the different health topics and facilitation techniques. **The training will be held from January 23-27, 2017**. I would say that you would be dedicating approximately 3-6 hours a week to this program and each week can vary depending on the amount of events we have. If the training time does not fit your schedule, I would encourage you to keep our program in mind for the following year as we try to take new applicants every semester.

Peer Health Educators are given the opportunity as they progress in the program to focus on a specific area of health they are passionate about through our committees. Committee options are subject to change based on need, but usually include areas of focus on sexual health, alcohol/drug use, and mental health. Those peers interested in focusing on mental health will have the opportunity to work extensively with the Counseling Center as 2nd, 3rd, and 4th semester peers.

**Peer Health Education Program
Application for Spring 2017 Semester
DUE: Monday, November 21, 2016**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UMBC Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UMBC ID #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Mobile Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMICS**

Major/Minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class Year (freshmen/sophomore/etc): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expected Date of Graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AVAILABILITY**

Number of Courses for Next Semester:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organizations & Other Non-Academic Commitments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Can you Commit 3-6 Hours per Week to the Program – Yes or No? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you make yourself available for a mandatory orientation/training between the dates of January 23rd and 27th – Yes or No? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFERENCES**

*Professional or Academic – no friends/family (can be on or off campus)*

Name:

Job Title:

Company/Organization:

Phone/Email:

How Do You Know This Person?:

*UMBC Professional or Academic – no friends/family (UMBC Facutly or Staff Only)*

Name:

Job Title:

Department:

Phone/Email:

How Do You Know This Person?:

*UMBC Student Leader (may be a Peer Health Educator, an RA, student org exec board member, student manager, etc.)*

Name:

Campus Leader Position:

Phone/Email:

**QUESTIONS**

*Please answer the following questions in paragraph format on a separate sheet of paper, typed (300-500 words total).*

1) How did you find out about the Peer Health Education Program?

2) Why are you interested in health promotion and education? Have you had any significant experiences that lend to your interest in the Peer Health Education program?

3) What qualities and skills do you have that would make you a good fit for the Peer Health Education program? What makes you stand out as an applicant?

4) Do you have any particular areas of interest within health promotion, education or awareness that you are passionate about? (i.e. mental health, sexual health, alcohol/drug use, physical health, etc). Please explain your interest.

5) What do you see as the **most** important health or wellness issue on UMBC’s campus? How would you suggest the university address/educate/support students around this issue?

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*By signing above, I am acknowledging that my application may be reviewed by staff members from Health Education and/or Counseling, as well as student staff. I also acknowledge that any online or social media account I hold is subject to review and may influence my application.*

**APPLICATION DEADLINE IS FRIDAY, NOVEMBER 21,2016!**

Please submit applications to the Office of Health Promotion (ground floor of Erickson Hall). You may also email or fax your application to the Health Education Coordinator, Priya Patel, at:
Email: priyap1@umbc.edu
Fax: 410-455-1125