

# Peer Health Application 2013-2014

## **Program Expectations**

The Peer Health Program is seeking applicants for the 2013-2014 school year. Successful applicants will be able to communicate with a wide variety of students, have a strong interest in serving the Bowdoin Community through educational outreach, and bring unique skills and/or experiences to the current group.

## **A strong Peer Health applicant should possess the following qualities:**

- Possess sensitivity to personal health topics and have a willingness to talk openly about these topics
- Be non-judgmental and accepting of various cultures, practices and sexual orientations
- Demonstrate a genuine enthusiasm for promoting health and wellness at Bowdoin

## **What do Peer Health members do?**

- Peer Health members are responsible for finding creative ways to increase dialogue and raise awareness about relevant health issues on campus
- Peer Health members work to promote health and wellness services on campus

## **What is the expected time commitment for Peer Health members?**

- Attendance at Spring orientation, May 18<sup>th</sup> – May 20<sup>th</sup> - **Mandatory**
- Attendance at Fall orientation, dates TBD - **Mandatory**
- Attendance at a weekly one-hour evening meeting on Tuesdays 7:15-8:15. Be flexible to spend up to 3 hours per week on Peer Health activities.
- Each member of the group must play an integral role in the creation, development, and coordination of health or wellness programming.

## **Application Process**

In your statement of application, please answer each question thoughtfully and completely. Due to the high number of applications we receive each year, your responses should not exceed two single-spaced pages total.

Additionally, please ask a faculty member, staff member, or peer to act as a reference. Your reference will be emailed a recommendation form after you have submitted your application. Your application and reference will only be read by members of the selection committee and will be treated confidentially.

This application is due no later than **Wednesday March 6<sup>th</sup> at noon.**

Please e-mail to [whogan@bowdoin.edu](mailto:whogan@bowdoin.edu) or put in campus mail to Whitney Hogan,  
24 College Street

## Peer Health Application 2013-2014

### Part I: Personal Information

Name \_\_\_\_\_

Class year \_\_\_\_\_ E-mail \_\_\_\_\_

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

A reference is required for this application. Please indicate the name of the faculty member/coach/  
advisor/peer you will ask to be your reference:

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

1. Will you be studying abroad next year? Y/N \_\_\_\_\_ Fall Term \_\_\_\_\_ Spring Term

2. Have you applied to Peer Health in the past? \_\_\_\_\_ Yes \_\_\_\_\_ No

3: Based on applicant numbers, not all students may be selected for an interview. **Please circle all time slots you are available for a group/private interview on Friday, April 5th**

12:10 – 1:40    1-1:45    1:50-2:35    2:40-3:25    3:30-4:15    4:20-5:05

4. The Peer Health Education program covers many areas of health and wellness. Please indicate which of the following topics interests you.

\_\_\_\_ Alcohol and Drugs      \_\_\_\_ Nutrition, Exercise  
\_\_\_\_ Sexual Health          \_\_\_\_ Mental Health/Wellness Practices  
\_\_\_\_ Healthy Relationships    \_\_\_\_ Body Image/Body Satisfaction  
\_\_\_\_ Sleep

5. Please list any other activities you anticipate being involved in next year and the anticipated weekly time commitment for each (i.e. work, clubs, tutoring, sports teams, social house responsibilities, etc.)

***I have read the Peer Health Education information sheet and understand the commitment involved.***

Signature \_\_\_\_\_

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

## **Part II: Additional Information**

1. How do you see yourself contributing to Peer Health?

2. How do you see yourself growing within a Peer Health position?

4. What challenges do you anticipate facing as a Peer Health member?

5. What is a common college student attitude, issue, or misinformation that you would like to see changed on this campus? How would you help change it?

6. Please include any other information you feel would be helpful in our consideration of your application

*Please return this application to Whitney Hogan [whogan@bowdoin.edu](mailto:whogan@bowdoin.edu) by **5pm on Wednesday, March 6th**. If you are selected for an interview you will be notified by Monday, April 1st.*