Peer Leader Qualifications:
1. Freshman (2nd Semester), Sophomore, Junior, or Senior
2. Minimum Cumulative GPA: 2.75
3. Grade of A in College Connections
4. Recommendation/approval by the professor of the course
5. Excellent communication and leadership skills
COLLEGE CONNECTIONS
PEER LEADER APPLICATION

Date of Application: ________

(Semester you want to serve as a Peer Leader)    (Course Section, Day & Time)

NAME ___________________________    MUSTANG ID # ______________

LOCAL ADDRESS ___________________________________________________________________

Street (or MSU Box #)    City    Zip    Telephone    E-Mail

HOME ADDRESS ___________________________________________________________________

Street    City    Zip    Telephone    E-Mail

COLLEGE CLASSIFICATION _________    MAJOR ________________________    CUM GPA _____

ARE YOU EMPLOYED? ___YES    ___NO    IF YES, HOW MANY HOURS PER WEEK ___

SPOUSE’S NAME (IF APPLICABLE) ___________________________________________________

ORGANIZATIONS (ACTIVITIES) YOU HAVE BELONGED TO (PRIOR TO AND AT MSU) – PLEASE Indicate OFFICE(S) YOU HAVE HELD IN THESE ORGANIZATIONS

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

OTHER HONORS ________________________

__________________________________________________________________________________

LIST COLLEGE SCHOLARSHIPS YOU HAVE RECEIVED _________________________________

__________________________________________________________________________________

APPLICATION – PAGE 2
Why are you interested in this position?
Why do you feel you are a good candidate to be a Peer Leader?

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

REFERENCES (ONE REFERENCE MUST BE M.S.U. FACULTY. PLEASE LIST NAME OF INDIVIDUAL, PHONE NUMBER AND INDICATE RELATIONSHIP TO YOU)

1. _________________________________________________________________________________

____________________________________________________________________________________

2. _________________________________________________________________________________

____________________________________________________________________________________