

Peer Mentor Application

YOUR CONTACT INFORMATION

First Name Last Name

Address

City/State Zipcode

Phone Email

STUDENT INFORMATION

How many credits are you taking this semester? _____ Your GPA _____

What hours are you able to work?

Mon	Tues	Wed	Thurs	Fri
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

GENERAL INFORMATION

Why are you interested in being a Peer Mentor?

INSTRUCTIONS:

Please rate the following statements on a scale of 1-5. 1: Not Comfortable At All/Poor 5: Extremely Comfortable/Excellent

QUESTIONS:

RATING SCALE:

	1	2	3	4	5
How would you rate your performance at your last job?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How comfortable are you with answering phone calls?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How comfortable are you with multitasking and handling multiple responsibilities simultaneously?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How comfortable are you working with various computer software and databases?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How familiar are you with academic policies and procedures, such as course registration and college requirements?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rate your attention to detail when it comes to accurately maintaining records and documentation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rate your overall customer service skills in terms of providing a positive and welcoming experience to students and visitors.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>