**Department of Psychology**

**Undergraduate Peer Academic Advising Program**

**APPLICATION**

***Please return via Email Attachment to Prof. Elizabeth Wierba (wierba@umich.edu)***

***Deadline: November 13, 2018***

*Please visit Psychology Peer Advisors before applying to discuss your own academic and/or career plans, and the role of the peer advisor.*

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Uniquename\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ID#\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Local Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected Term of Graduation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Major(s)/Minor(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. How would you describe the role of a peer advisor, and the necessary skills or qualities?**

**2. Why are you interested in becoming a Peer Advisor?**

**3. List any experiences where you worked with peers (those of your own age and standing). Please include any course projects, research, volunteering, etc., and a description of how you interacted with others.**

**4. What experiences have you pursued as an undergraduate that may help you to guide others? Consider summer jobs, internships, study abroad, activities outside of the classroom, volunteer activities, etc.**

**5. What are your career goals at the present time?**

**Please list three references (name, relationship/position, email) we may contact about you:**

**1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IF SELECTED FOR THE PROGRAM, YOU MUST:**

1. **"SHADOW" A CURRENT PEER ADVISOR BEFORE THIS TERM ENDS.**
2. **ATTEND THE PEER ADVISORS TRAINING on TUESDAY, January 8 FROM 12-5PM.**

**Signature (Initials if electronic):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**