

Peer Mentor Application

Due Date: Friday, April 19, 2019

*Please note that submission of this application does not guarantee participation in the program. Your application will be reviewed by a team and you will be notified of the decision. Thank you for your interest in supporting the students of G-A!



To be considered for the Peer Mentoring course, a student must select **two teachers** to complete this form. The completed form must be returned by the teacher **to the Guidance Office** by **Friday, April 26, 2019** in order for the student's application to be considered complete.

Student Name:

Activity	Needs Improvement (1) Excellent (5)	Comments
Attends class regularly	1 2 3 4 5	
Is on time to class	1 2 3 4 5	
Completes assignments on time	1 2 3 4 5	
Displays school pride	1 2 3 4 5	
Respects school environment	1 2 3 4 5	
Shows positive attitude	1 2 3 4 5	
Gets along well with others	1 2 3 4 5	
Demonstrates ability to work well with others	1 2 3 4 5	
Ability to keep commitments	1 2 3 4 5	
Ability to engage independently	1 2 3 4 5	
Accepts responsibility	1 2 3 4 5	
Demonstrates initiative	1 2 3 4 5	



In what subject areas do you believe this student would make a strong (List all and be as specific as possible)	mentor?
What do you see as areas of strength for this student?	
What, if any, concerns do you have about this student becoming a Peer	Mentor?
Additional comments?	
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Teacher Signature	 Date



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