



1300 Eagle Road, St. Davids, PA 19087

**The College Success Program for Students with Autism Spectrum Disorder
Undergraduate Peer Mentor Job Application**

SECTION 1 OF 5: PERSONAL INFORMATION

Name: _____ Gender: _____

Address: _____

Phone numbers: Cell: _____

Home: _____

Email address: _____

SECTION 2 OF 5: CAMPUS INFORMATION

Student ID number: _____

Are you currently a student in good standing? Yes No

Major or area of interest: _____

Class standing for the upcoming fall semester: sophomore junior senior

Will you be a residential student for the upcoming academic year? Yes No

List the residence halls in which you have lived: _____

Have you ever been a commuter student? Yes No

If yes, when: _____

Current or previous on campus work experience: _____

Name of supervisor(s): _____

May I contact this person/people? Yes No

List current/past campus clubs or activities: _____

List leadership positions you have held: _____

SECTION 3 OF 5: WORK EXPERIENCE

Current/most recent employer: _____

Address: _____

Phone number: _____

Email address: _____

Position held: _____

Dates of employment (from / to): _____

Name of Supervisor: _____

May I contact this person? Yes No

Previous employer: _____

Address: _____

Phone number: _____

Email address: _____

Position held: _____

Dates of employment (from / to): _____

Name of Supervisor: _____

May I contact this person? Yes No

SECTION 4 OF 5: OTHER INFORMATION

Do you have a valid driver's license? Yes No Will you have a car on campus? Yes No

Have you read the CSP Undergraduate Peer Mentor Job Description? Yes No

Do you understand the position requirements? Yes No

List any skill(s) or experience(s) that you have that might be pertinent to your employment as a Peer Mentor to students with Autism Spectrum Disorder: _____

SECTION 5 OF 5: SIGNATURE

I hereby declare the information provided by me in this application, including any supplemental attachment, is true, correct, and complete to the best of my knowledge. I understand that if employed, a misstatement or omission of fact on this application shall be considered cause for dismissal.

I understand that a condition for employment is being in good standing as a citizen of the Eastern University community. My signature below authorizes CCAS to contact the Dean of Students and/or the Vice Provost for Student Development to verify that I am in good standing in the community.

Signature: _____

Date: _____

Eastern University is an Equal Opportunity Employer. Eastern University affirms its position as a Christian University of the liberal arts and asserts its right to employ persons who subscribe to the intent, mission, and doctrinal position stated in the university catalog. Additional details may be obtained from the Office of Human Resources.

**Return to Sharon Thompson, College Success Program Coordinator
through campus mail c/o CCAS or
hand deliver to CCAS (Walton 210 – 3rd floor)**