

MATTAWAN CONSOLIDATED SCHOOL

56720 Murray Street Mattawan, Michigan 49701 | 269.668.3361
www.mattawanschools.org



STUDENT PALS [PEER ASSISTANT LEADERS] APPLICATION FORM

Student Name: _____ Grade: _____

Address: _____ School Email Address: _____

Counselor: _____ Phone Number: _____

T-shirt Size: _____

CURRENT SCHEDULE

Hour	Class	Teacher
1 ST		
2 ND		
Seminar		
3 RD		
4 TH		
5 TH		
6 TH		

Please obtain at least two teacher recommendations for consideration in this program. Ask the teachers to return their recommendations to Mrs. Flachier.

Write the names of the teachers you have given your recommendation forms to here:

Once your application has been reviewed, you may be invited to a personal interview for the program. Your application status will be sent to your school email. Please continue to page two and finish filling out the questions and statements before you turn in the application to the guidance office.

Are you involved in any extracurricular activities? If so, please describe:

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Why do you want to be a peer helper?

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What personal problems/experiences/changes have you worked through that would be beneficial in helping other students?

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PAGE 2

Please use the following prompts to write a complete sentence to best express your thoughts/feelings:

1. I like _____
2. The future _____
3. My mother _____
4. When I get mad _____
5. A worry is _____
6. Parents _____
7. School _____
8. Friends _____
9. My father should learn _____
10. Others think of me _____
11. When I need to talk _____
12. Marriage _____
13. One thing I really don't like about myself _____
14. When I am bored _____
15. A favorite _____
16. I can't _____