Peer Health Advisor Application

Our Mission:
- To make Lehigh University a healthier and safer place through strategic peer-to-peer interactions focused on the promotion of healthy behaviors.

Who We Are:
- Students trained by Health Advancement & Prevention Strategies staff members and other campus experts on priority student health topics such as alcohol, prescription drug abuse, sleep, sexual health, stress, and infection prevention.

What We Do:
- Sponsor and participate in health awareness campaigns and events and offer interactive health programs for Student Organizations, Residence Halls, and/or anyone else who requests them.
- Coordinate campus events around priority health topics and observances to foster community and healthy behaviors among Lehigh University students.
- Develop and implement positive, lasting campus culture and policy change.

Interested in becoming a Peer Health Advisor?

Here are the next steps you need to take:

1) Submit attached application via email or to UC 403 by Sunday, September 22nd.
2) Selected applicants will undergo an interview process which takes place in October 2019.
3) Accepted applicants will attend the remaining Peer Health Advisor meetings in the Fall 2019 semester, held on Thursdays at 4-5pm.

Training is expected to take place in Spring 2020 and will consist of foundational training as well as training on priority student health issues. Trainings will be delivered by the Health Advancement & Prevention Strategies staff as well as other campus experts. It will be offered as a 4-credit Health, Medicine, and Society class on Tuesday/Thursdays from 2:35-3:50pm, and is a requirement to become a Peer Health Advisor, though students may opt to not take the class for credit.

We look forward to receiving your application!
Peer Health Advisor Application Form
Lehigh University 2019

*Submission Deadline: September 22, 2019 @ 11:59pm EST

Name: ____________________________ Date: __________________

Lehigh E-mail Address: ______________ Lehigh ID (LIN): _____________

Cell Number: _______________________

Expected Year of Graduation: __________

Major(s): ____________________________

Minor(s): ____________________________

**Short Answers:**

1. Why are you interested in becoming a Peer Health Advisor?

2. What other clubs and organizations are you involved in on campus?
3. Have you ever been found responsible for any violation of the Lehigh University Code of Conduct (including but not limited to alcohol / drug violations, academic integrity, etc.)? You should also answer yes if the Medical Amnesty policy was applied to your case and no formal sanctions were imposed.

☐ Yes    ☐ No

4. Applicant student conduct records are reviewed using Lehigh ID numbers (LIN). Do you consent to this background check?

☐ Yes, I consent    ☐ No, I do not consent

5. How did you learn of the Health Advancement & Prevention Strategies Peer Health Advisor program?

The second part of our application process includes two in-person interviews, conducted throughout October 2019. You will be contacted about an interview and asked to schedule a time online.

Questions? Contact Jenna Papaz @ inhaps@lehigh.edu

Applications may be submitted in one of two ways:

1. E-mail: Health Advancement & Prevention Strategies Office (inhaps@lehigh.edu)
2. Drop off: University Center Room #403A.
(Tel: 610.758.0275)