



## 2009-10 Peer Mentor Reference Form

### Peer Evaluation

Name of Applicant:

**Applicant:** Please print out this and the following pages, fill in your name on this page and the next page and give to your Peer evaluator for him/her to complete. He/she should send the completed form directly to Sarah Feyerherm, NOT TO YOU.

**Evaluator:** The applicant listed above is applying to be a Peer Mentor at Washington College for the 09-10 Academic year. Peer Mentors are a select group of students who work with new students, beginning with contact over the summer, continuing through orientation and into the first semester. In order to hire the students best suited for this important work, we appreciate your help in assessing the qualities of the applicants. Please be candid in your evaluation and include any information that you believe will help us select the best students.

**Note:** This evaluation form will be used solely by the Peer Mentor Selection Committee in its selection process and will not become part of the student's permanent file. Therefore, the information on this form will remain confidential and will not be disclosed to the student or any other parties not involved in the selection process.

Please send the completed Reference Form by **March 6, 2009** to:

Sarah Feyerherm  
Associate Vice President for Student Affairs  
Casey Academic Center

## Student Peer Peer Mentor Recommendation Form

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Applicant Name \_\_\_\_\_

1. In what capacity do you know the applicant?

2. How well do you know the applicant? (Circle one)

a. Slightly

b. Fairly well

c. Very well

3. Please rate the applicant in the following criteria, using the scale below:

1 = Below Average    2 = Average    3 = Above Average    4 = Excellent    NB = No basis for evaluation  
*Circle the appropriate number that best corresponds  
to your opinion about the student*

**Academic Commitment:** Student is committed to academic excellence and the primary importance of academics at the college.

1                      2                      3                      4                      NB

**Leadership Skills:** Student demonstrates the abilities to inspire, encourage, manage, and work with others.

1                      2                      3                      4                      NB

**Organization:** Student can prioritize tasks and manage multiple demands.

1                      2                      3                      4                      NB

**Initiative:** Student is self-motivated and willingly takes on tasks and completes them.

1                      2                      3                      4                      NB

**Interpersonal Skills:** Student relates well to others in a mature manner.

1                      2                      3                      4                      NB

**Responsibility:** Student is prompt, dependable, and follows direction.

1                      2                      3                      4                      NB

- please complete other side -

**Communication Skills:** Student has the ability to communicate effectively in both the written and verbal formats and is an attentive listener.

1                      2                      3                      4                      NB

**Maturity:** Student demonstrates a well-developed sense of judgment, common sense, and can look at situations from a broad perspective.

1                      2                      3                      4                      NB

**Social Sensitivity:** Student is knowledgeable and respectful of differences among people and is aware of appropriate and inclusive methods of communicating to people of varying backgrounds.

1                      2                      3                      4                      NB

Additional comments that might help the committee evaluate this candidate:

Please indicate your overall impression of the suitability of this candidate for a Peer Mentor position:

\_\_\_\_\_ Highly recommended

\_\_\_\_\_ Recommended

\_\_\_\_\_ Recommended with reservations

\_\_\_\_\_ Would not recommend at this time

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Title/Position \_\_\_\_\_

Please return this form by **MARCH 6, 2009** to:  
Sarah Feyerherm • Associate VP for Student Affairs • Casey Academic Center