



APPLICANT INFORMATION

Name (Last)	(First)	(Middle)
Birthdate	Age	Gender
Home/Permanent Address		
(City)	(State)	(Zip)
Cell phone	Email	
College/University attending	GPA	Expected Graduation Date
School Address		
(City)	(State)	(Zip)
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Major	Minor (if applicable)
Activities/Interests (include clubs)		
Reference 1 (Name)	(Tel)	(Email)
Reference 2 (Name)	(Tel)	(Email)

WORK/VOLUNTEER EXPERIENCE

Dates (From)	(To)
Dates (From)	(To)
Dates (From)	(To)

Briefly describe why you are interested in being a Peer Mentor and what skills and attributes you think would help you in this role:

The undersigned applicant certifies that she/he is a student in good standing at the educational institution listed above and authorizes it to release her/his transcript and other information requested to the Compass Academy Network and to permit Compass Academy to perform any background checks as necessary and appropriate:

Signature	Date	/	/
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Compass Academy Network admits students of any race, color, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its education policies, admissions policies, and other school-administered programs.

For more information: Contact Shauna Tharp, Program Director at stharp@compassacademynetwork.org

Return to: **Compass Academy Network, Inc. | PO Box 2427 | Joplin, MO 64803 | Or info@compassacademynetwork.org**