

## First-Year Experience Peer Mentor Faculty or Staff Recommendation Form

To the student: *Complete Section I of this form and forward it to the recommending faculty or staff member.*

### Section I

Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

### Section II

**Dear SHSU faculty or staff member:**

This student is applying to be a Peer Mentor in First-Year Experience. These mentors provide support for UNIV 1101, which helps acclimate first-time students to SHSU and build community. Mentors will meet with students one-on-one and in small groups in UNIV 1101. Please return this form to the student applying to be included with their application.

The First-Year Experience is seeking motivated students to mentor Bearkats to have a successful first year and beyond. Please provide a candid evaluation of this student's potential to coach students.

	Excellent	Above Average	Average	Below Average	N/A: no basis for evaluation
Organization					
Interpersonal Skills					
Communication Skills					
Time Management					
Responsibility/Dependability					
Initiative					
Academic Skills					
Positive Attitude					

Please check one:

I highly recommend this applicant.

I recommend this applicant.

I recommend this applicant with reservations.

I do not recommend this applicant.

Faculty/Staff Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Email: \_\_\_\_\_ Department: \_\_\_\_\_

For questions or concerns please contact Samantha Aldrich-Wollgast at 936-294-2231 or email at [saldrich@shsu.edu](mailto:saldrich@shsu.edu)

**Please return this form to the Department of First-Year Experience in CHSS 190 or email [saldrich@shsu.edu](mailto:saldrich@shsu.edu)**