PEERS Team Recommendation Form

The PEERS Team (People Empowering Each other to Realize Success) is a program that provides support and training to active student leaders, interns, staff, and faculty with the goal of enhancing wellness and student success. With a focus on peer support, we facilitate collaboration between the individuals of the Cabrillo College community. The Cabrillo College PEERS Team works in collaboration with Student Health Services, the Human Services program and other Student Services to provide peer counseling services. This collaboration will link students with support services, promote positive decision-making, and empower the students to make a difference on campus through social and educational initiatives.

The student named below, has applied to be a member of the PEERS Team and, if selected, will be working with students in a peer counseling role as described above. PEERS Team members must:

- Serve as a college role model and advocate for responsible and healthy lifestyle choices.
- Have very good communication skills.
- Demonstrate leadership and a desire to serve Cabrillo College students.

Please answer the following questions about the applicant. Additional comments are appreciated (see #5).

Student Name: ___________________________________________  ________________________________

Last  First  MI

Recommended by: ____________________________________________  ________________________________

Last  First  Contact Information

Relationship to student: __________________________  How long? _________________

Circle the best response.

This student:

1. Has the capability to be successful on the PEERS Team.

   Strongly Disagree  Disagree  Neutral  Agree  Strongly Agree

   1  2  3  4  5

2. Has the personal qualities to interact appropriately in sensitive/stressful situations.

   1  2  3  4  5

3. Has the communication skills to work collaboratively.

   1  2  3  4  5

4. Has the dedication and passion to make a 2 semester commitment.

   1  2  3  4  5

5. Please feel free to add or attach or further comments on the reverse side of this application.

Signature ___________________________  Date ____________________

Please return the completed form to the student.