Healthy Noles Peer Health Educator Application

The Health Promotion Department at University Health Services Health and Wellness Center provides FSU students with opportunities to gain valuable professional experience and build leadership skills. These hands-on opportunities and practical experiences are designed to strengthen your understanding of Health Education/Health Promotion.

Full Name ________________________________________________________________

E-mail Address _____________________________________________________________

Phone Number _____________________________________________________________

Major of Study _____________________________________________________________

Anticipated Graduation Date ________________________________________________

1. How do you see becoming a Peer Health Educator benefitting your professional and/or educational goals?
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

2. In your opinion, what attitudes, behaviors, or beliefs currently held by the FSU community are the most detrimental to the current or future health, wellbeing and success of FSU students?
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

3. We hope to provide opportunities to you as Healthy Noles Peer Health Educator to sharpen your existing skills and develop new skills. How would you rate your present skill level?

   **Presentation skills**
   None       Basic       Intermediate       Advanced

   **Communication skills**
   None       Basic       Intermediate       Advanced
### Advocacy skills
- None
- Basic
- Intermediate
- Advanced

### Community Organization skills
- None
- Basic
- Intermediate
- Advanced

### Leadership skills
- None
- Basic
- Intermediate
- Advanced

### Event Management skills
- None
- Basic
- Intermediate
- Advanced

### Planning, Organizing, implementing, administering & evaluating health education Program
- None
- Basic
- Intermediate
- Advanced

4. Keeping in mind all other extracurricular interests & activities, honestly and realistically, how many hours do you anticipate being able to commit to the Healthy Noles Peer Health Educator program per week?
   a. 2-4 hours
   b. 4-6 hours
   c. 6-10 hours
   d. 10-20 hours

5. What interests you about becoming a Healthy Noles Peer Health Educator? (150 words or less)
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

6. How did you hear about the Healthy Noles Student Organization? (Circle all that apply)
   a. Friend
   b. Website
   c. Class
   d. New student orientation
   e. Other ____________________
7. Do you have a specific interest? (Circle all that apply)
   a. Nutrition
   b. Exercise
   c. Sexual Health
   e. Tobacco/Smoking Cessation
   f. Alcohol
   g. Drugs

8. Please provide any additional information you feel will assist us.
   __________________________________________________________________________
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