

PEER EDUCATOR INFORMATION

Please print clearly. Thanks!

Name _____ DOB _____ Date _____

Address (dorm or Pratt area) _____

Box number _____

Phone number _____

Email address (that you use) _____

Home town _____

Campus Interests/involvement in: (other clubs, sports, groups, etc.) _____

Some issues we will try to promote awareness of:

- Alcohol and Drug awareness
- Tobacco cessation
- STDs
- Impaired driving
- Sexual Responsibility
- Safe Spring Break

PEER EDUCATORS: Students helping students make more responsible, healthier, life-style choices.

****Looking for someone who wants to initiate a health or wellness promotion. Could that be you??**

_____ Yes!!

_____ Not right now, maybe next semester

_____ Not me!

Return to the College Health Office or College Health mailbox ASAP.

College Health Office
Riney Student Center/Across from bookstore
620-450-2150 leighann@prattcc.edu