Mayville State University
Peer Leader Application

EMPLID #_________________________

Name _______________________________________________________
        Last       First       Middle

MSU Address _____________________________________Cell Phone ________________________

Home Address ____________________________________Phone ________________________

MSU email address______________________________________________________________
Please note: We will communicate regarding the application process, training and other responsibilities via this address

Number of terms attended MSU____________________________________________________

Major ______________________________ Anticipated Graduation Date ________________

Semester Hours Completed ___________ Cumulative GPA_______________

Did you reside in an MSU Residence Hall this year? _____yes _____no

Will you be residing in an MSU Residence Hall next year? _____yes _____no

What are some of the hobbies or activities in which you like to participate?

As a student, what MSU academic and other resources have you used?

Name two Mayville State references

1. ________________________________________________________________

2. ________________________________________________________________

Return completed application form by Friday, March 28, 2014 to:
Kristi Lentz
Classroom Building
Office # 115