****

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

PACKtivist Peer Application

**Section I.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Gender Pronoun: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Local Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\State\Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name and Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Academic Status**

First Year \_\_\_\_ Sophomore \_\_\_\_ Junior\_\_\_\_ Senior\_\_\_\_ Grad\_\_\_\_

Major|Minor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cumulative GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Languages Spoken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

References (TWO non-family references):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When are you available for meetings? (circle all that apply)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mondays** | **Tuesdays** | **Wednesdays** | **Thursdays** | **Fridays** |
| Mornings | Mornings | Mornings | Mornings | Mornings |
| Afternoons | Afternoons | Afternoons | Afternoons | Afternoons |
| Evenings | Evenings | Evenings | Evenings |  |

**Section II.**

Please answer the following questions; you may use additional pages if necessary.

**Interpersonal violence** for the purpose of this program is defined as: is when a person attempts to have power and control over another.  The abuse can occur through the use or threat of physical, sexual, or emotional violence, economic control, isolation, or other kinds of coercive behavior. NV CARES works to provide prevention programming for interpersonal violence so that students are aware of resources as well as ways to end violence before it occurs.

1. Please describe why you are interested in being a PACKtivist peer. What do you feel you could contribute to the program? What are you interested in gaining out of this experience?
2. When working as a peer, you may encounter many types of people. Please tell us about your perspective of working with people of varying ethnicity, gender, sexual orientation, ability, religion, lifestyle and value.
3. What issue(s) do you think is currently the biggest threat to college campuses in relation to interpersonal violence? Why?
4. Have you ever had any previous presentation or event planning experience? If yes, please describe.
5. Describe any time commitments you have during the coming year, such as student teaching, employment, membership in organizations, etc. Please note any leadership positions held. Also describe any other work or volunteer experience that you have that would support your application.

**Section III.**

Have you been found responsible for any student judicial violations? Have you ever been charged with any criminal violations? If yes, please explain in detail.

This position requires an 8 hours of training plus a Green Dot training. After completion of the training an academic year commitment is expected from you. This commitment consists of 6 hours a month during the academic school year. Can you commit this amount of time?

Yes\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

To the best of my knowledge, all of the above information is correct.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**PACKtivist Peer Description**

Students selected to be NV CARES PACKtivist Peer will be required to fulfill the following duties:

* Complete the 8 hour peer training as well as attend a Green Dot training
* Attend mandatory meetings during the semester. If you miss a meeting, schedule an appointment with the NV CARES Coordinator to debrief within one week. Failure to do so will put you on inactive status pending a meeting with the coordinator.
* Maintain regular contact with the NV CARES Coordinator regarding schedule changes, availability, event planning/programming, and workshop development, etc.
* Develop programming and events for the University of Nevada campus community
* Attend and participate in various university events representing the NV CARES program
* Facilitate or assist in facilitations on prevention education and awareness presentations as requested by University of Nevada campus community
* Develop interactive displays and tabling ideas
* Assist in organizing and recruiting students for Green Dot trainings
* Disseminate information to students about interpersonal violence (IPV) resources and services
* Assist in the design and development of promotional materials and marketing campaigns
* Maintain social media accounts
* Commit to a minimum of 6 hours per month during the academic year after completing the peer training
* Additional duties as assigned

Please sign that you have read and understand these expectation of participation in the NV CARES PACKtivist Peer Program.

Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Return to Daniel Fred, NV CARES Coordinator**

**Orvis Building Room 201**

[**nvcares@casat.com**](mailto:nvcares@casat.com)