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**Briefly state why you would like to be a peer mentor.**

**To assist in matching mentors and mentees: (Optional)**

**Gender:**  Male  Female

Single  Married  Divorced/Separated  Widowed

**Number of children under the age of 10** \_\_\_\_\_

**Number of children over the age 10** \_\_\_\_\_

**Your interests or hobbies** \_\_\_\_\_

**Additional Information**

Is there anything else we should know, that might assist us as we seek to match you with the best mentee for you (e.g., areas of interest, gender, age, special needs/concerns, etc.)?

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*Please return or mail your completed application to:*  
**Penn State Continuing Education Peer Mentoring Program**  
**121 Outreach Building, University Park PA 16802**  
**Phone: 814-865-3443 Fax: 814-863-2504**

You may also e-mail your completed application to [psu4you@outreach.psu.edu](mailto:psu4you@outreach.psu.edu).

*Thank you for participating in the CE@UP Peer Mentoring Program. We will contact you soon!*