

*Please fill out completely.*

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

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

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

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

\_\_\_\_\_

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

DOB: \_\_\_\_\_

UALR Email: \_\_\_\_\_

**Be sure to add ualr.edu to your "safe" senders so our emails don't go to your junk mail folder!**

Anticipated Major/Degree: \_\_\_\_\_

I am currently a: F    S    J    S                      My anticipated graduation date is: \_\_\_\_\_

I attend classes: Full-Time      Part-Time

Career Goal: \_\_\_\_\_

New adult students need to know: \_\_\_\_\_

\_\_\_\_\_

I want to be a peer mentor because: \_\_\_\_\_

\_\_\_\_\_

Hobbies or Interests:

\_\_\_\_\_

\_\_\_\_\_

Please **email** your completed application to:

[cmalexander@ualr.edu](mailto:cmalexander@ualr.edu)

*Office of Campus Life  
University of Arkansas at Little Rock  
2801 S. University, DSC 216  
Little Rock, AR 72204  
501.569.3308*

**FOR OFFICE USE**

Recorded

Mailing List

Shirt

Assigned: \_\_\_\_\_