



Ohio FCCLA Peer Educator Application 2009-2010



Explanation:

The Ohio Peer Education Program consists of a network of freshman, sophomore, and junior students across the state of Ohio who works collaboratively and innovatively to develop and carry out a peer education focused program of work. Students involved learn a variety of Family & Consumer Sciences skills, develop their leadership, connect with community members, and publicize FCCLA. Do you think this is for you? WE DO!

Responsibilities:

Ohio FCCLA Peer Educators must be willing to:

1. Serve a term lasting from October 1, 2009 – May 1, 2010.
2. Be willing to work closely with students from across the state
3. Participate in monthly conference calls
4. Work closely with the Ohio State Executive Council, FCCLA interns, and the state advisor
5. Attend the Peer Education Academy, October 12-13, in conjunction with Fall Leadership Camp
6. Facilitate 2 presentations to local organizations (School's Board of Education, civic groups, community foundations)
7. Coordinate 1 financial education service learning project in their local chapter and report back to the FCCLA interns
8. Develop and execute a public relations plan for their FCCLA Chapter (Newspaper Article, Letter to the Editor, Radio, etc.)
9. Submit one article to be published in the State Office News Brief
10. If available, assist with Financial Literacy Bowl and State Leadership Conference

- Peer educators will receive an official Ohio FCCLA Peer Educator polo, a customized leadership development plan, state recognition, a flash drive with resources, and partial compensation for attendance at the Peer Educator Academy*.

- Only 3 Applications per school will be accepted and reviewed.

-Applications must be postmarked by **May 15, 2009** and sent to:

**Ohio FCCLA Peer Education
25 South Front Street MS 611
Columbus, OH 43215**

-Applicants and Advisors will be notified by **June 1, 2009**.

*Peer educators are responsible for \$20 towards the Peer Educator Academy.

2009-2010 Peer Educator Application

Please Type or Print Neatly

Applicant Name _____ Phone (____) _____

Applicant Home Address _____

_____ City State Zip

Applicant Email Address _____

Chapter's Name _____

School Name _____

School Address _____

_____ City State Zip

Adviser Name _____ School Phone (____) _____

Adviser Email _____

County _____ FCCLA Region _____ (1- 10)

Type of Chapter: _____ Comprehensive _____ Occupational/Workforce

Grade of Applicant for 09-10 school year _____ Scholastic Average _____

Will you be taking a Family and Consumer Sciences course next year?

_____ YES _____ NO

1) What offices have you held in the FCCLA organization and at what level? (List)

2) What type of peer education and service learning projects have you been involved with?

3) Why would you make a good peer educator?

4) What is one goal you have for yourself and for Ohio FCCLA and what are your plans for achieving those goal?

5) Please list the names and addresses of the 2 closest newspapers that cover your area:

I acknowledge by signing that I am willing to serve as a 2009-2010 Ohio FCCLA Peer Educator, and I am responsible for the \$20 Academy fee if I resign in the duration of the term.

Signature of Applicant: _____ **Date:** _____

Signature of Advisor: _____ **Date:** _____