



PEER SUPPORT 2026 EXPRESSION OF INTEREST

STUDENT INFORMATION

NAME:

PSI CLASS:

EMAIL:

PARENT/CARER INFORMATION

NAME:

MOBILE:

EMAIL:

PEER SUPPORT INTERESTS

Tell us briefly about your reasons for wanting to mentor Year 7s:

ATTITUDES FOR LEARNING

To best support the Year 7s and other Peer Leaders, you will need to be well organised and committed. Please provide information detailing what subjects you are doing and/or community/cocurricular experiences you have had that demonstrate your management skills:



TEACHER REFEREE

Please ask a current teacher to provide a brief personal reference in this space:

TEACHER NAME:

TEACHER SIGNATURE:

Student Signature _____

Date _____

Parent/Carer Signature _____

Date _____