**Peer Partner Application**

***\*\*\* Due Friday, January 31, 2020 \*\*\****

Peer partners are matched up with special needs students during their PE class. It will count as your PE class. The partners assist them as appropriate, whether it is assisting during activities in class, in the locker room, helping maneuver the hallways, or simply just being a good friend to talk to. Peer partners was established to help create a successful adapted physical education class. It is like having numerous “mini instructors” in class but you are participating as well during activities. It helps involve the special needs students both physically and mentally.

**To be considered for peer partners you must complete the following:**

* You must be a **junior or a senior next school year**
* **YOU MUST BE ABLE TO SWIM** – we have a swim unit and **ALL PEER PARTNERS** are expected to be in the water with their partners
* Submit a one-page summary to Mrs. Woulfe (Women’s Coaches Office) about why you want to be part of the peer partners program. This should be typed and double spaced.
* Parent Signature on this form and attached to one page summary
* Obtain **1** PE or health teacher recommendation

**A list of peer partners for the 2020-2021 school year will be posted outside the women’s coaches’ office on Feb. 18.**

Student name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Email address:

Year Currently in school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current PE/Health period:

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

**PE/HEALTH TEACHER RECOMMENDATION**

***Please return completed form to Mrs. Woulfe by Friday, January 31, 2020.***

Teacher Name (PE/Health):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

This is a recommendation for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Student’s current grade in PE/Health: ---------------

Please rate the student:

1. Leadership Excellent (Top 5%) Great Average Below average
2. Responsibility Excellent (Top 5%) Great Average Below average
3. Social Skills Excellent (Top 5%) Great Average Below average
4. Initiative Excellent (Top 5%) Great Average Below average
5. Attitude Excellent (Top 5%) Great Average Below average

Please give a brief explanation on why you think this student would be a good candidate for peer partners.