Choosing Healthy Options in College Environment (CHOICE)
Peer Health Educator Internship (LHW 488) Application Form
CENTER FOR PREVENTION AND OUTREACH (CPO)

Ellen F. Driscoll LMSW, CASAC
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NAME: ________________________________________ SBU ID ______________________________
Phone number: _________________________________________________________________
Senior ____ Junior ____ Sophomore____
Commuter ____ Resident ____
Address: __________________________________________________________________________

E-mail: ____________________________________________________________________________

Please indicate which campus organizations you are member of:

Athletics:
Sports Clubs:
Fraternity/Sorority:
International Student:
Other

How did you learn about this internship?

Are you able to commit to two semesters? Yes: ___ No: ___
(Preference is given to students who are able to commit to completing two semesters)

Training weekend – All Peer Educators are required to participate in weekend training in the
beginning of the fall semester at an off campus location – transportation, food, training and
accommodations are provided by CPO.

Please use the back of this form to write one paragraph to express your interest in
CHOICE.

Return completed applications via email to CHOICE instructors or drop it at 216 Stony Brook
Union.