



## Orientation Counselor Application

### Requirements

All applications must be submitted by **5pm on Thursday, August 31** to the Orientation office (137 Killian Annex). Late applications will not be accepted.

- Candidates must submit their resume as a part of the application.
- Candidates must submit three recommendations, one of which must be a WCU faculty member.
- A 2.75 GPA is required, 3.0 preferred (must maintain a 2.75 throughout employment period).
- No judicial or disciplinary violations defined by the Student Code of Conduct.

If hired, new employees must attend retreats, Open House events, and on-the-job trainings. New employees will also be required to enroll in a one credit hour course during the Spring semester.

### Applicant Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Preferred Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Local Address: \_\_\_\_\_  
*Street* *Apartment/Unit #*  
\_\_\_\_\_  
*City* *State* *Zip*

Phone: (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

Class Level:  Freshman  Sophomore  Junior  Senior

Major Course of study: \_\_\_\_\_ GPA: \_\_\_\_\_

How did you find out about the Orientation Counselor position? \_\_\_\_\_  
\_\_\_\_\_

Did you attend orientation?  Freshman  Transfer  I did not attend orientation

If not, please explain: \_\_\_\_\_

Are you bilingual?  Yes  No

If yes, indicate the language(s) in which you are fluent: \_\_\_\_\_

List any campus activities and involvement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Recommendations

Please provide us with the name, mailing address or campus address, phone number, and email of individuals submitting Orientation Counselor recommendation forms. Remember, one must be a WCU faculty member.

Please use the Recommendation Form provided with the application (Page 3) and submit all recommendations to the Orientation Office in a sealed envelope with your Orientation Counselor application. OR, recommendations can be mailed directly to the Orientation Office, Western Carolina University, 137 Killian Annex, Cullowhee, NC 28723.

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### Recommendation 1

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

Title/ Position: \_\_\_\_\_

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

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

### Recommendation 2

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

Title/ Position: \_\_\_\_\_

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

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

### Recommendation 3

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

Title/ Position: \_\_\_\_\_

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

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

## Short Answer Questions

In 650 word maximum for all of your answers combined, please type and attach to application.

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1. What would a "perfect" day look like for you?
2. How do you act when you're stressed out?
3. At which store would you like to max-out your credit card?
4. What was your favorite TV show when growing up?
5. What is your favorite movie?
6. How do you see this position fitting into your academics?
7. What do you hope to learn in this position that you can apply to your academics and to your future?
8. If you were to tell one person "Thank You" for helping me become the person I am today, who would it be and what did they do?
9. Can you play any instruments? If yes which one(s).
10. What is your favorite cereal?
11. What's the strangest talent you have?
12. What was your childhood nickname?
13. Do you have any strange phobias?
14. Which way does your toilet paper hang on the wall – over or under?
15. What are three things still left on your bucket list?
16. If you could have any one superpower, which would you choose?
17. Name two books that you suggest others read? (if you're not a reader, name two books you want to read.)

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*I give my consent to Orientation Programs to check my enrollment status and current GPA listings to determine eligibility for employment.*

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

**Note: Please print three copies of the following page and give your references so that your recommendations may be completed in a timely manner. Thank You.**



## Orientation Counselor Application

### Recommendation Sheet

**Qualities** – please rate the applicant on the areas below based on the following scale. Use space provided to elaborate on each item if necessary.

Applicant's Name \_\_\_\_\_

	Poor	Average	Good	Outstanding	No Opinion
<b>Integrity</b>					
<b>Punctuality</b>					
<b>Time Management</b>					
<b>Dependability</b>					
<b>Initiative</b>					
<b>Attitude</b>					
<b>Maturity</b>					
<b>Group Motivation</b>					
<b>Group Facilitation</b>					
<b>Responsibility</b>					
<b>Ability to follow directions</b>					
<b>Leadership Skills</b>					
<b>Flexibility</b>					
<b>Oral Communication</b>					
<b>Written Communication</b>					

Please provide us with any Strengths/Weaknesses of this applicant as well as anything noteworthy you would like to share about this applicant. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommended by (please print): \_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*