



Dragons for Disability Awareness (DDA) Mentor Application

Contact Information

First and Last Name: _____ Preferred Pronouns: _____

(e.g. she/her/hers)

8-Digit Drexel ID #: _____

Phone Number: _____

Drexel Email Address: _____

Academic Information

College: _____

Major: _____

Year (e.g., first-year): _____

Personal Information and Preferences

What are your hobbies and interests outside of academics? Please list 1-3 of your interests.

- 1.
- 2.
- 3.

Gender Identity (skip if you prefer not to disclose): _____

Communication- Please rank your preferred method of communication on a scale of 1-5 (1 being your first choice):

Email _____ Phone Call _____ Text _____ In-person _____ Zoom _____



DREXEL UNIVERSITY

Office of

Disability Resources

Match Preferences- How would you like to be matched with your mentor? Please rank your preferences on a scale of 1-4 (1 being your first choice):

Disability_____ Major_____ Gender Identity_____ Other (please specify) _____

Personal Statement - In 3-5 sentences please explain why you want to become a peer mentor.

References: Please list the name and email for 1 on-campus/community reference. (e.g. professor, academic advisor, RA, accommodation coordinator, etc.)

Thank you for your interest in joining the ODR's Dragon's for Disability Awareness Peer Mentoring Program!

Documents can be submitted in one of the following ways:

Email: disability@drexel.edu

Fax: 215.895.1402

DEADLINE: Friday September 3, 2021.