AODA Advocate Application
Office of Residence Life
University of Wisconsin-Whitewater
Fill out the application online using the form below, or print out an application.

You will be contacted	ed to schedule an inte	rview when positi	ons becom	ne availab	le.
Current UW-W Add Phone Number: Email Address: Major: Minor: Anticipated graduat		s No			
List two references	we can contact:				
Reference Name	Phone Number	Relationship	Email	Title	Place of Work
Please describe any Residence Halls or o	leadership positions l on campus.	held or activities y	ou've parti	icipated v	vith in the
Why are you interest	sted in the AODA Ad	vocate position an	d what do	you hope	to gain from it?

Please describe specific experiences related to Substance use issues that prepare you for the AODA Advocate role.
Of the issues addressed by the AODA Advocate Program (alcohol and other drugs) which would you find easy to discuss with other students and which would you find difficult to discuss with other students. Why?
What experience if any, do you have in making presentations to groups? What is your level of comfort in speaking to groups?

