**FLEX ADVISOR AND FLEX ASSESSOR RECRUITMENT 2016-2017**

***Application Form***

Please read through this short application form and fill in the information requested.

To complete your application to FLEX, please email the following to Niki Giannopoulos, FLEX Manager, VFMP, at niki.giannopoulos@ubc.ca by **June 20, 2016**:

* A short cover letter
* Your CV
* This completed application form

|  |  |
| --- | --- |
| **Your name:** |  |
| **Your email address:** |  |

***IF THIS IS YOUR FIRST TIME APPLYING TO FLEX, PLEASE SKIP TO Q2***

***Please answer the questions below by placing an X in the appropriate boxes:***

|  |  |  |
| --- | --- | --- |
| ***Q1. If you were a Tier 1 or 2 FLEX Advisor assigned to a group of students for FLEX Small Group sessions in MEDD 419 in 2015/2016, are you willing to continue working with the same group of students in MEDD 429 in 2016/2017?*** | Yes |  |
|  |  |
| No |  |
|  |  |  |
| ***Q2. You are:*** | Applying for MEDD 419 (Yr 1) ONLY |  |
|  |  |  |
|  | Applying for MEDD 429 (Year 2) ONLY |  |
|  |  |  |
|  | Willing to work in BOTH MEDD 419 and MEDD 429 at the same time |  |
|  |  |  |
| ***Q3 Which positions interest you?(Mark ALL that apply)*** | MEDD 419 FoS Advisor |  |
|  |  |
| MEDD 419 FLEX Advisor (Full) |  |
|  |  |
| MEDD 419 FLEX Advisor (Term) |  |
|  |  |
| MEDD 419 FLEX Assessor/Advisor |  |
|  |  |
| MEDD 429 FLEX Advisor |  |
|  |  |
| MEDD 429 Assessor/Advisor |  |