**Peer Support Group Society Application Form**

We’d like to ask a few questions to help you start thinking about how your new Peer Support Group will operate. This also helps us gain a better understanding of your ideas!

Once you've completed this form, please email it to union.opportunities@uea.ac.uk

After your application is reviewed and approved by Union Council, we’ll get in touch to ask you to sign a constitution form.

 **Basic Information**

|  |  |
| --- | --- |
| Peer Support Group Name: What’s the name you’d like for your Peer Support Group?   |  |
| Please explain how you are different from other student groups e.g. societies? |  |
| How do you feel the support group will benefit members? |  |

**Main Activities**

|  |  |
| --- | --- |
| What types of activities or events will your Peer Support Group run? How frequent will these be? (regular/monthly/annually etc.)  |   |

**Membership and Wellbeing**

|  |  |
| --- | --- |
| How will you make sure your group can continue after this year/after you graduate?  |  |
| How do you plan to provide a supportive and enjoyable experience for your members (e.g. what tasks will each of your committee take on, how will you ensure events are held regularly)?   |   |
| How will you safeguard your committee and members, including safety, well-being and healthy boundaries? |  |

**Committee Structure**

Whilst it is not mandatory to have a full committee for a Peer Support Group, this really helps with organisation and other operational issues (e.g. using Expense365 to claim/sign off on funds). If you have anyone who is interested in the role/s, please list them below:

|  |  |
| --- | --- |
| President:  |  |
| Vice President:  |  |
| Treasurer:  |   |
| Health and Safety Officer:  |   |
| Equality and Diversity Officer: |   |
| Welfare Officer:  |   |

**Inclusivity and Equal Opportunities**

|  |  |
| --- | --- |
| Ensuring Equal Access: How will your society make sure it’s accessible and inclusive for everyone, in line with the Union’s commitment to equality?   |   |

**Additional Information**

|  |  |
| --- | --- |
| What are your concerns about running the group (e.g. having enough committee members, budgets, etc)? |  |
| Anything Else?  Is there anything else you’d like to add to help us understand the purpose and activities of your Peer Support Group?   |   |