

**Gordon-Conwell Theological Seminary**

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# Mentored Ministry

## LEARNING COVENANT COVER SHEET

**NOTE: A Learning Covenant or Update must be completed for EACH SEMESTER.**

**- PLEASE complete each SECTION of this form CAREFULLY -**  
or it may be returned without approval.

Name \_\_\_\_\_ Degree \_\_\_\_\_ ID # \_\_\_\_\_ Box \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ E-mail: \_\_\_\_\_

**Course Number: (circle below)**

**Semester:** \_\_\_\_\_

*(IMPORTANT - You must register for unit(s) with Registration before starting the semester to receive credit.)*

MM 502 (unit 2)   MM 602 (unit 4)   MM 702 (unit 6)   EM/MM 502 (unit 2)   EM/MM 602 (unit 4)  
MM 601 (unit 3)   MM 701 (unit 5)   EM/MM 601 (unit 3)   Other: \_\_\_\_\_

**Total Weeks this covenant covers:**

*Must be at least  
12 weeks  
(Fill in)*

**Total Hours per week:**

Include preparation, on-site ministry (minimum half of hrs. involved) and supervision.

*Must be at least  
10 hours  
(Fill in)*

Beginning date: \_\_\_\_\_

Termination date: \_\_\_\_\_

**Weekly Mentoring Meetings:**

Day \_\_\_\_\_  
Hour \_\_\_\_\_  
Location \_\_\_\_\_

**Check One:**

\_\_\_\_\_ 1 hr. each week  
\_\_\_\_\_ 2 hrs. every two weeks

**Ministry Information:** Mentor's Name: \_\_\_\_\_

Is Mentor officially approved (in MM Database?) \_\_\_\_\_ Yes \_\_\_\_\_ No *(If no, contact MM office immediately)*

Student's position or role: \_\_\_\_\_

Church/Ministry name: \_\_\_\_\_ Church E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Street                      Town                      State                      ZIP

**Covenant Accepted: (Do not turn in unless signed by both student and mentor.)**

Student: *(signature)* \_\_\_\_\_ Date \_\_\_\_\_

Mentor: *(signature)* \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE READ:** An email confirmation will be sent to student to notify of approval or any issues concerning the Learning Covenant. Mentors and students are encouraged to use the LC as a guideline throughout the semester for growth, however the original LC will be kept on record in student file. This covenant must not be terminated before the agreed date by either the student or the mentor without the approval of the Director or Assistant Director of Mentored Ministry.

For Office Use Only:  Email Confirmation Sent     Entered in Student Record     Entered in Mentor Record

Approved by Director / Asst. Dir. of Mentored Ministry \_\_\_\_\_ Date \_\_\_\_\_

## COMPOSING THE LEARNING COVENANT

Please type the information requested below. Repeat each question or subject matter in the heading for each item. Single-spacing within a paragraph and double-spacing between paragraphs is preferred. A total of two or three pages will be sufficient.

Give careful thought to your learning needs as you prepare your responses. Keep your comments brief and concise, but do not give superficial responses. This is your learning covenant in which you are intentionally stating objectives for yourself as you engage in this ministry. Your signature is your commitment to work on these objectives, and the signatures of your mentor and the Director of Mentored Ministry attest to their readiness to assist you in meeting these goals.

### A. Job Description

1. Describe your specific duties for this unit as agreed to by you and your mentor.
2. *Briefly* comment on how your duties correlate with your learning needs in preparing you further for Christian ministry (further elaboration to be done under Learning Objectives).
3. State how your involvement during this unit will help the church or ministry fulfill its mission in the world.
4. Report any financial arrangements made.

### B. Supervision and Resources

1. Comment on what you desire in your relationship with your mentor (mentoring qualities, availability, spiritual counsel, etc.).
2. List several topics for discussion (tentative dates should also be included) beyond your immediate ministry tasks/concerns which you plan to *proactively* discuss with your mentor over the course of the 12-week unit. State also how you would like to see the mentoring meetings handled or structured.
3. Describe any resources (people, books, materials, etc.) you intend to utilize in meeting your objectives for this unit.

### C. Learning Objectives (unit-specific)

Comment on your learning objectives for the three areas listed below. Remember that your Progress Report or Final Evaluation for this unit will ask you to assess your progress in meeting these objectives, and that your objectives are to be related to your learning and developmental needs. Although there may be some overlap among the three areas, be distinct and specific in your responses.

1. Ministry Character (Being): State the **personal characteristics and attitudes** you desire to work on developing during this period of time (12 weeks). Be specific. Do not focus on tasks or functions, but on personal qualities and attributes. Choose 2-3 measurable objectives for this unit.
2. Ministry Knowledge (Knowing): Describe the areas of **knowledge** you intend to gain from working in this unit. This has to do with matters of content about given subjects that relate to ministry. Choose 2-3 measurable objectives for this unit.

3. Ministry Skills (Doing): Comment on the ministry **skills** you want to develop in this ministry and what you will do to achieve this. Be specific, not general. Look at areas of professional development for yourself. Choose 2-3 measurable objectives for this unit.