

APPLICATION TO MENTOR

GENERAL INFORMATION

Full Name _____

Church/Ministry Name _____

Title/Role in Ministry _____

Church/Ministry Address _____

City _____

State _____

Zip _____

(Country) _____

Church/Ministry Website _____

Denomination (*as applicable*) _____

Personal Denomination (*if different from church/ministry*) _____

Email Address _____

Work Phone _____

Student (*as applicable*) _____

EDUCATION (List colleges and graduate schools attended.)

Name of School _____

Location _____

Dates (YYYY – YYYY) _____

Degree _____

CAREER (List your professional ministry experience since college.)

Name of Church/Company _____

Your Role _____

Date (MM/YY – MM/YY) _____

Full/Part-Time _____

OFFICE USE ONLY **Approved** **Not Approved**

SIGNED: _____ DATE: _____
(Director of Mentored Ministry)

E-MAIL RESPONSE; TYPE: _____

MENTOR DB ENTRY STUDENT DB (IF APPLICABLE) E-CONNECTION LIST FOLDER LETTER ARCHIVE

SUPERVISORY TRAINING *(Comment on whether you are certified at another seminary as a supervisor and/or your experience in supervising ministry students.)*

MENTORING SKILLS *(Please discuss why you would like to supervise/mentor a student. Please indicate the skills and qualities you possess that you feel make you a good mentor.)*

BIOGRAPHICAL INFORMATION *(Write a brief paragraph discussing your background, your goals and dreams.)*

THEOLOGICAL THOUGHT *(What is the prevailing spiritual/theological issue that means the most to you?)*

PERSONAL *(What are your hobbies and interests?)*

REFERENCES

(1) A Spiritual Leader/Mentor

E-mail and Phone

(2) Someone You Have Discipled/Mentored

E-mail and Phone

SIGNATURE

Signature

Date