



APPLICATION FOR A MENTOR

Name: _____ Date: _____

Address, City, ZIP: _____

Email: _____ Date of Birth: _____

Phone (home): _____ (cell): _____

Parent/Guardian Name(s): _____

School Attending: _____ Grade: _____

Do you attend our youth ministry worship services? Yes No Sometimes

Are you a Christian? Yes, I'm sure No Not sure

Are you in a small group? Yes No

If so, which one? _____

If not, would you like to be contacted by someone from a local small group?

Yes No

What school or community activities do you participate in? _____

What do you do for fun (hobbies, interests)? _____

Please circle whichever words describe you:

Spiritual

Sensitive

Shy

Outgoing

Adventuresome

Talkative

Confident

Moody

Nervous

Friendly

Enthusiastic

Impatient

Impulsive

Serious

Bold

Analytical

Other: _____

Why are you interested in having a mentor? What would you like a mentor to help you with?
