



## SHARING THE JOURNEY MENTOR APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home phone \_\_\_\_\_ work/cell \_\_\_\_\_ Email \_\_\_\_\_

Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

Single: \_\_\_\_\_ Married:yr. \_\_\_\_\_ Divorced:yr. \_\_\_\_\_ Widowed:yr. \_\_\_\_\_

Spouse's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Children's ages: M) \_\_\_\_\_ (F) \_\_\_\_\_

Step children/foster: \_\_\_\_\_ Children living with you: \_\_\_\_\_

Grandchildren: \_\_\_\_\_

Occupation: (or former) \_\_\_\_\_

Volunteer work (Church, community-present/former) \_\_\_\_\_

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Please answer these questions as thoughtfully as possible. They are used to match women together. You may use the back of this form or an additional sheet to complete your answers if necessary. Information provided will be shared only with members of the Sharing the Journey leadership team.

1. Please share the reasons you are interested in extending friendship and support to a young woman.

2. What strengths or gifts has God given you to help you encourage and support someone as a mentor friend?

3. How would people who know you well describe the way you relate to others?

4. What life experiences have you had which you may help you empathize with a someone needing guidance and friendship? e.g. strong marriage, positive parenting, special needs child, single parenting, loss of loved one, divorce, etc.
5. Are there areas you would not feel comfortable helping someone with. (Similar examples as in question #4)
6. Briefly describe your relationship with Jesus Christ.
7. How long have you been attending Trinity? \_\_\_\_\_ Are you a member? \_\_\_\_\_
8. Please provide names/phone numbers of 2 references, and specify your relationship.
9. Are you willing and able to commit to serve faithfully to spend time in preparing and coming alongside a young woman as friend, encourager and supporter?  
 This time will include at least:  
 -One Saturday morning training session  
 -Visits with your mentee (weekly or agreed upon frequency)  
 -Occasional meetings with other mentors for sharing, support & prayer  
 -Sharing confidential prayer requests with prayer support team
- Yes       No
10. Please indicate any considerations on the list below which may impact or limit your ability to serve as a mentor. Check any that have or are currently affecting your life. Use the space below to further explain any areas checked.
- Medical/health conditions
  - Career/work time constraints
  - Family/child care obligations
  - Psychological/mental health conditions
  - Criminal convictions
  - Other

**Please read and sign below:**

The information I have provided in this application is true and complete to the best of my knowledge. I agree to participate in training and occasional meetings and to function within the boundaries of the Trinity Sharing the Journey Ministry. I give permission to contact references I have given.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Thank you for completing this application. Please return no later than **February 10, 2012** to Betty Zaun, 13091 Wickshire Lane, Tustin, CA 92782. You will be contacted for a personal interview before the training on Saturday, February 25, 2012. We invite your prayers as together we seek God's guidance and direction in Sharing the Journey with other women.

For questions regarding this form, or the Sharing the Journey Ministry, please contact Betty Zaun 714-544-0393 [shaffas@pacbell.net](mailto:shaffas@pacbell.net).