

# Application for Mentoring

Please fill in this form if you are seeking to be mentored or to be a mentor.

## Getting started—a few personal details

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_ (M) \_\_\_\_\_

Email Address: \_\_\_\_\_

Age: *(please circle)* under 18 18-25 26-35 36-45 46-55 55+

Occupation: \_\_\_\_\_

Interests and Hobbies: \_\_\_\_\_

Marital Status: \_\_\_\_\_

## Mentoring and You

If you would like to find a mentor, what are you hoping to achieve through having a mentor?

\_\_\_\_\_  
\_\_\_\_\_

Is there someone at Gateway who comes to mind when you think of a mentor for yourself?  
If so, who? \_\_\_\_\_

Do you have a preferred time to meet (eg evenings, weekends, weekdays)?

\_\_\_\_\_

If you are interested in becoming a mentor, please provide the names and phone numbers for two referees (at least one referee should be a Pastor at Gateway)

Referee 1: Phone: \_\_\_\_\_

Referee 2: Phone: \_\_\_\_\_

*Please complete this form, place it in a sealed envelope marked **Mentoring** and put it in the Information Desk or mail to PO Box 2033, Mansfield Qld 4122.*