



APPLICATION TO BECOME A MENTOR

Date: _____

1. Name: _____ Date of Birth: _____
 Address: _____
 Phone: (Hm) _____ (Wk) _____
 Cell Phone: _____ Email: _____
 Marital Status: _____ Name of Spouse: _____
 Ages of Children: Boys: _____ Girls: _____

2. Being a volunteer mentor requires that you:

- Meet with a child, on average, 2-3 hours a week for a minimum of one year.
(At the end of the year you & the child can recommit. The most helpful relationships last several years.)
- Be a minimum of 21 years of age
- Be a Christian for a minimum of one year
- Are an active, committed participant in a local church
- Attend a four hour mentor orientation facilitated by BCMI
- Complete the screening process
 - Interview
 - Four References (spouse/closest family member, pastor, employer, friend)
 - Background check

Are you willing and/or able to comply with these requirements? _____ yes _____ no

3. Would you have any restrictions affecting your availability and your ability to meet weekly with a child such as: family, car, license, schedule, etc?

4. Do you plan to live locally for as least one year? _____

5. Have you had any recent injuries of illnesses? _____

Do you have any physical challenges of limitations that would impact your ability to meet your commitments to this ministry? _____

6. Are you currently employed? _____

If yes, who is your employer? _____



What is your position? _____

Length of time employed? _____

7. What church do you attend? _____

How long have you attended? _____

Are you involved in church activities? _____

If yes, what are they? _____

If no, have you participated in any Church activities in the past? _____

If yes, what were they? _____

8. How and when did you come to faith in Christ? _____

9. Why do you wish to become a mentor? _____

10. If you are married or living with relatives, how does your family feel about your becoming a mentor?

11. What characteristics and strengths do you feel you have that make you well-suited to be a mentor?

12. What hobbies and/or interests do you have that you may be able to share with a youth?

Signature

Date

Please return to BCMI, 1367 Main ST., Brockton, MA 02301