

SELF-ASSESSMENT for PROSPECTIVE MENTORS

1. Why do you want to be a mentor? (Additional space on reverse side)

2. Have you had a mentor in your life? _____. If yes, please describe that mentoring experience and how it has affected or shaped you. (Additional space on reverse side)

3. How and when did you come to faith in Christ? (Additional space on reverse side)

4. How many years have you been a Christian?

<5

5-10

11-20

21-30

>30

5. Please describe your journey of faith and your current walk with Christ. (Additional space on reverse side)

6. How would you describe your prayer life? (Additional space on reverse side)

7. How often do you spend time reading and reflecting on God's Word?

Daily

Weekly

Bi-weekly

Monthly

8. How willing are you to share your Christian testimony with another man (on a scale of 1 [not] to 5 [very willing])?

1

2

3

4

5

9. So, are you ready to mentor a fellow Christian? _____

OR, if your mentee is not a Christian, are you ready to lead him to Christ and then disciple him?

10. How would you rate yourself as a “good listener” (on a scale of 1 [worst] to 5 [best])?

1 2 3 4 5

11. How would you rate yourself on transparency, i.e., how willing are you to “let it all hang out” (on a scale of 1 [worst] to 5 [best])?

1 2 3 4 5

12. How would you rate yourself on vulnerability, i.e., how willing are you to share your own struggles (on a scale of 1 [worst] to 5 [best])?

1 2 3 4 5

13. Can you commit to meeting with your mentee twice a month for 1-1 ½ hours for an entire year? _____

14. Is there anything that we have not asked above that would affect your ability to be a mentor? (Additional space below)

15. What reservations (if any) do you have about being a mentor? (Additional space below)

Additional space for answers (show each question’s number)

I agree and authorize Parker Evangelical Presbyterian Church to conduct a background investigation as a condition of my application to become a mentor with Mentoring Men.

Name (please print) _____

Signature _____ Date _____

Preferred: Telephone # _____ E-mail address _____

Reviewed by M² Leadership Team (signature) _____ Date _____