## **Embrace Mentee Application**

|              |                |              | APPLI              | <b>CANT INFOR</b>   | MATION =       |                  |
|--------------|----------------|--------------|--------------------|---------------------|----------------|------------------|
|              |                |              |                    |                     |                |                  |
| Full Nam     |                |              | F: .               |                     | N 4 1          | Date:            |
|              | Last           |              | First              |                     | M.I.           | •                |
| Address:     | Street Add     | ross         |                    |                     |                | Apartment/Unit # |
|              | Street Add     | ress         |                    |                     |                | Apartment/Onit # |
|              | City           |              |                    | Stat                | <br>te         | ZIP Code         |
| Dlassas      | •              |              | _                  |                     |                |                  |
| Phone:       |                |              |                    | mail:               |                |                  |
| What typ     | oe of ministr  | y do you fee | el called to?      |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
| In a few \   | words, tell us | about your   | testimony. How d   | id you come to fait | h in Jesus?    |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
| <b>NA</b> /1 |                | .1           | . 13               |                     |                |                  |
| What ch      | urch do you    | currently at | tend?              |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
| What is y    | our current    | involvemer   | t in the church?   |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
| What wo      | ould you like  | to gain fron | n a mentoring expe | erience?            |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
|              |                |              |                    | EDUCATION           |                |                  |
| High Sch     | nool:          |              |                    |                     |                |                  |
| Town/Cit     | ty & State:    |              |                    |                     |                |                  |
| Did you      | araduate?      | YES          | NO Year:           |                     |                |                  |
|              | _              |              |                    |                     |                |                  |
| College:     |                |              |                    |                     |                |                  |
| Years att    | ended:         |              | Graduation Da      | te:                 | Degree Earned: |                  |
| Post Gra     | duate Colleg   | ae/Seminary  | ,                  |                     |                |                  |
| School:      |                |              |                    |                     |                |                  |
|              |                |              |                    |                     |                |                  |
| Years att    | ended:         |              | Graduation Da      | te:                 | Degree Earned: |                  |

| DISCLAIMER AND SIGNATURE  |                  |  |  |  |  |  |
|---|------------------|--|--|--|--|--|
| I understand that this program will require a personal commitment to meet with both the ment<br>one-on-one meetings with my Mentor for the six-month duration of the program. | toring group and |  |  |  |  |  |
| understand that a mentorship is a relationship between Mentor and Mentee. As with any relationship, it will require trust, time, and effort.                                  |                  |  |  |  |  |  |
| Signature:  | Date:            |  |  |  |  |  |

Please email or mail application to teri.wmutx@txb.org | 10325 Brockwood Rd, Dallas, TX 75238

Teri Ussery 214-828-5374

## **Embrace Mentor Application**

|              |                    | APPLICANT INFO  | DRMATION ====             |                                |
|--------------|--------------------|---|---------------------------|--------------------------------|
|              |                    |   |                           |                                |
| Full Nam     |                    |   |                           | Date:                          |
|              | Last               | First   | M.I.                      |                                |
| Address:     |                    |   |                           |                                |
|              | Street Address     | 5   |                           | Apartment/Unit #               |
|              |                    |   |                           |                                |
|              | City               |   | State                     | ZIP Code                       |
| Phone:       |                    | Email:  |                           |                                |
|              |                    |   |                           |                                |
| Please lis   | st your area(s) of | ministry experience:  |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
| What ch      | urch do you cur    | rently attend?  |                           |                                |
|              | •                  | <u>,                                      </u>                                      |                           |                                |
|              |                    |   |                           |                                |
| <b>VA</b> /I |                    |   |                           |                                |
| What is y    | your current invo  | olvement in the church?   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
| What pro     | ompted your int    | erest in becoming a mentor?   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
| D            |                    |   |                           |                                |
| Do you n     | nave previous ex   | sperience as a mentor? If so, please provid   | e a brief explanation:    |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
|              |                    | DISCLAIMER AND  | SIGNATURE ===             |                                |
|              |                    | DISCLAIMER AND  | SIGNATORE                 |                                |
|              |                    | ogram will require a personal commitmer<br>vith my Mentee for the six-month duratio |                           | nentoring group and            |
| l underst    | and that a ment    | torship is a relationship between Mentor a  | and Mentee. As with any r | elationship, it will require   |
|              | ne, and effort.    | is a relationing between riteritor  | Torreso. 7 to wren driy i | o.aorioriip, ie iiiii regaii e |
|              |                    |   |                           |                                |
|              |                    |   |                           |                                |
| Signature    | e:                 |   |                           | Date:                          |

Please email or mail application to teri.wmutx@txb.org | 10325 Brockwood Rd, Dallas, TX 75238

Teri Ussery 214-828-5374