



River Valley Christian Life Corps Mentor Application

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: Home _____ Cell: _____

Email address: _____

Do you have a current driver's license? ___Yes ___No

Education completed? _____

Do you have special training? _____

Church Membership: _____ Please attach a reference letter from your pastor.

Pastor's Name: _____

Emergency Contact: Name & Relationship: _____

Emergency Contact Phone Number: _____

How did you hear about RVCLC?

Why do you want to serve as a RVCLC mentor?

Tell us about yourself: (Church/Community Activities/Current Participation)

Previous Participation: _____

What spiritual gifts, skills, abilities, talents, experiences, etc., do you bring to the mentoring relationship?

Will you commit to attend quarterly celebrations/meetings? Y N

Do you give your permission for a background check on you? Y N