

Skyline Women's Discipleship/Mentoring Application Form

Name: _____ Date: ___/___/___

Address: _____

Phone: (____) _____ - _____ (cell or home?) OK to text? Y N

Email: _____

Demographic information:

Date of Birth: ___/___/___

I am: (check one) ___ Single ___ Married ___ Divorced/Remarried ___ Divorced/Single ___ Widowed

If married, how long? _____ My husband is a Christian: Y N N/A

Children info:

Name _____ Age _____ Gender _____

Occupation: _____

Active Hobbies & Interests: _____

When are the best times/days that you are available to meet? _____

___ I would like to be mentored. ___ I would like to be discipled.

I would prefer to be placed in:

___ A 1-to-1 female/female relationship ___ An all-female small group (no more than 4 + leader)

List 3 hopeful outcomes you expect from this experience.

1. _____ 2. _____ 3. _____

Please indicate any subjects or issues that you would like to study or discuss:

Please briefly discuss your journey of faith in Jesus Christ:

What else do you feel we should know/consider in matching you?

Once completed, return this form to Pastor Tylene Howarter along with a request to be mentored/discipled and she will contact you to meet in person. thowarter@skylinechurch.org

When a match is found, your mentor/discipled will contact you and arrange to meet. You are not obligated to the relationship if it is not compatible. Please contact Pastor Tylene Howarter if this occurs. If it is suitable, arrange between yourselves and begin!