



## References

Please submit the names of two references. Select persons who know you well and are not family members. Please list their names and contact information below. Give each individual the reference form which is included in this application packet.

(1) Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Relationship to you \_\_\_\_\_

(2) Name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Relationship to you \_\_\_\_\_

## The Mentoring Role

Mentors help the students process their faith experiences and walk alongside them as they explore their beliefs, gifts and vocational discernment seeking to follow God's call. Mentors encourage young people to get involved in a ministry context. Faith Calls provides support and resources to mentors through training, assessment and continuing education opportunities offered by Perkins School of Theology. Through the mentoring component, the Faith Calls program seeks to nurture a circle of companions and partnerships between young people and adults in the church and community.

### Requirements

- Must be an adult, 25 years old +
- A clergy, church staff or layperson actively involved in a church.
- Conduct monthly mentor meetings with your mentee.

### Application

- Covenant Form
- Consent for Background Check
- Mentor Questionnaire
- Two References

I affirm that all the information listed is correct. I understand the requirements and responsibilities of a mentor and agree to the guidelines and procedures set forth in the Faith Calls program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Mail your forms to the address listed below:

Faith Calls  
SMU-Perkins School of Theology  
P.O. Box 750133  
Dallas, TX 75275-0133

phone: 214.768.1333  
phone: 214.768.1481  
tburton@smu.edu

<http://www.smu.edu/Perkins/PublicPrograms/FaithCalls>

## **MENTOR QUESTIONNAIRE**

*This questionnaire is to be completed by the prospective mentor.*

Please print or type legibly.

How do you know the youth applicant? Describe the quality of your relationship with this young person.

Discuss what you've learned in your past mentoring experiences, both when you've been mentored and when you've mentored others.

How do you view working with teenagers and college-age young people?

List any special skills, abilities, education, training and additional languages that may assist you in your role as a mentor. Please be specific.

How comfortable do you feel in the role of mentor? What intentional steps will you take to nurture this person in his or her spiritual journey?

As a mentor, can you meet with the mentee once a month while they are participating in the program?

yes      no      If no, please explain.

As a mentor, can you attend a training session?

yes      no      If no, please explain.

Have you ever been involved in, investigated for, arrested and/or convicted of any criminal offense?

yes      no      If yes, please explain.

Have you ever been convicted in a court of law for physical abuse, sexual abuse or neglect of a child or adolescent?

yes      no      If yes, please explain.

Is there anything from your past that would disqualify you from working with youth/teenagers?

yes      no      If yes, please explain.

Will you submit to a criminal background check?       yes    no

**PLEASE READ CAREFULLY**  
**Consent for Background Check**

We welcome your application to volunteer with a program of SOUTHERN METHODIST UNIVERSITY ("SMU"). You are applying to serve as a mentor for a participant in the *Faith Calls* program. In pursuit of that excellence, we require as a condition of retaining your volunteer services that all applicants consent to and authorize verification of the background information submitted on their application.

The results of this verification process will be used to determine eligibility under SMU/Perkins School of Theology employment/volunteer policies. All results will be proprietary and kept CONFIDENTIAL. The information obtained will not be provided to any parties other than to designate SMU personnel, unless otherwise required by law to be disclosed.

I, the undersigned, do hereby certify that the information I have provided for the purpose of this position is true and complete to the best of my knowledge. I understand that any false statements may be considered cause to decline my application. I authorize Acxiom and any of its agents/designated SMU personnel, to disclose orally and in writing the results of this verification process and/or interview to the designated authorized representatives of SMU.

I have read and understand this consent, and I authorize the background verification. I authorize persons, schools, current and former employers, and other organizations and agencies to provide Acxiom with all information that may be requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge SMU, its employees, Acxiom, and its associates to the full extent permitted by law from any claims damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from retrieving and reporting information about me. Any information obtained by the investigative agency conducting the background check will be used only in connection with the applicant's participation in the Faith Calls program.

APPLICANT (Please print or type):

\_\_\_\_\_

Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Other Names(s) of Record

\_\_\_\_\_

Date

\_\_\_\_\_

Address

\_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_

Social Security No.

\_\_\_\_\_

Driver License Number

State

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Date of Birth