


Expression of interest to receive mentoring

Please use block capitals when filling out the boxes below.

Name	Reason(s) for seeking mentoring ¹	Time(s) I am available to meet with a mentor ²
 Number		
Email address		

Notes:

¹ Please be as specific, as you can, in this box.

² Specify morning, afternoon or evening and specific days, if possible.

Once completed, please fold and place in the box marked 'mentoring' in the church welcome area.