



ELM

Evangelizing Catechesis | Lifelong Formation
Missionary Discipleship

Mentor Form
Cohort II: 2020-2021

Mentee Information

NAME: _____

EMAIL: _____ PHONE NUMBER: _____

PARISH: _____ TOWN: _____

MINISTERIAL FOCUS: _____

Mentor Information

A mentor should be someone who is currently ministering in, or has in the past ministered in, the mentee's own area of ministry; a mentor should also be prepared to engage consistently with the participant as adviser, guide, and conversation partner to assist in reflection and growth throughout the program.

A mentor can be procured through one's own research, or the OEEC will coordinate the pairing based on ministerial interests, stage of life, and other such parameters.

NAME: _____

EMAIL: _____ PHONE NUMBER: _____

PARISH: _____ TOWN: _____

CURRENT EMPLOYMENT: _____

Turn over

MINISTERIAL EXPERIENCES: *(Please indicate organization, location, and length of time)*

HOW LONG HAVE YOU KNOWN THIS MENTEE? _____

IN WHAT CAPACITY? _____

Personal Endorsement

I attest that the information enclosed within this application is honest and true, to the best of my knowledge. I accept that if any of it is found to be misleading or false, the participant for whom it is written may be removed from the ELM program.

This serves as an agreement that the undersigned mentor agrees to serve as such to the undersigned mentee for the entirety of their ELM process, and will commit to all required components of that process, including but not limited to the preparation of written reflections, as well as attesting to the ministerial preparedness of the mentee.

If at any time this agreement needs to be reevaluated, amended, or broken, we agree to contact the Office of Education, Evangelization and Catechesis promptly and assist in the search for a new mentor.

Mentee Signature

Date

Mentor Signature

Date

Please return signed and completed form via mail, fax, or email to:

Nicole M. Perone

Archdiocesan Director of Adult Faith Formation

Office of Education, Evangelization and Catechesis

467 Bloomfield Avenue

Bloomfield, CT 06002

860-243-9690 (fax)

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