

## Brave Circles Mentor Application



## **Contact Information**

Name:		
First	L	Last
Date of Birth (mm/dd/yyyy):		
Phone Number:		
Email:		
Address:		
Number	Street	ApartmentNo./Unit No.
	Province	Postal Code
Current Job Title/Occupation,	if applicable:	
Please list any education you	have received, if applicable:	
Institution Name	# of Years Completed	Degree, Certificate or Diploma
Please list any other relevant	education, training and/or certifi	cation:
	<u> </u>	

## **Skills, Qualifications and Interests**

Please list any languages you speak			
Are you currently involved in a local church?:			
<u> </u>	Yes No		
If yes,	please specify:		
(This w	e list your special interests and hobbies vill help us in matching you with a mentee. So please be as descriptive and include as many activities sible! For eg: baking, crafts, chess, basketball, painting, rap music, etc.)		
Do yo	u have access to a vehicle/transportation?:		
0	Anywhere in the city of Vancouver and surrounding areas (Burnaby, Richmond, etc) Only locations accessible by public transit Preferred areas (Please specify):		
Do yo	u have a vehicle and license to drive mentee to and from activities?		
<u> </u>	Yes No		
Are yo	ou willing to drive your mentee to and from activities? Yes No		

## **References**

Signature of Applicant

Please	provide two references:
1.	General Reference
	Name:
	Relationship:
	Telephone number:
	Email:
2.	Spiritual Leader Reference
	Name:
	Relationship:
	Telephone number:
	Email:

Date