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<http://www.jfa-nwiowa.org/ministries/youth-leadership/>



APPLICATION FORM for YOUTH MENTEE PARTICIPANTS

JFA’s goal is to positively impact area youth, families, school, businesses, and ultimately communities. The purpose of the program is to encourage and equip area youth to build healthy relationships, develop passions, contribute to community, and grow personally.

Youth’s first and last name: _____ Date: _____

Mailing address: _____

Phone number: _____ Cell Home Work

Email (if applicable): _____

How do you prefer to be contacted? Phone call Text Email

School: _____ Birthday: _____

Gender: _____ Race/ethnicity: _____

Include the following information pertaining to your parent(s) and/or guardian(s):

First and last name(s): _____

Mailing address: _____

Phone number: _____ Cell Home Work

Email (if applicable): _____

Identify the name of your school: _____

Check here if you desire your meetings to occur in school.

If you desire your meetings to occur outside of school, indicate below which day(s) work best:

Mon. Tues. Wed. Thurs. Fri. Sat. Sun.

Specify what time of day you are available to meet outside of school:

List any mental health, allergy, asthma or other medical related conditions:

Note any involvement with social services or the judicial system:

Identify any interests, hobbies, or activities you would enjoy sharing with a mentor:

What do you perceive as being particularly helpful in **Mentoring Youth for Leadership**?

- Someone to talk with Encouragement Gaining perspective
 Personal growth Service Other: _____

What would you like to accomplish through connecting with a mentor?

- Direction Spiritual growth Safe place for me to talk
 Positive outlook Accountability Other: _____

Describe the personality of a person or people with whom you get along well:

- Listener Wise Deep thinker Encourager Energetic Imaginative Athletic
 Adventurous Outgoing Reserved Free spirited Funny Sarcastic
 Intelligent Talkative Organized Confident Outspoken Humble
 Other: _____

Complete the prompts below. No answer is right or wrong.

I really feel connected when _____

I feel angry when _____

I am most joyful when _____

A job or task that I really enjoy is _____

I feel hurt when _____

Include anything additional that you would like your mentor to know about you:
