ASBURY theological SEMINARY
THE WHOLE BIBLE FOR THE WHOLE WORLD

MM520 and MM620
ATS Mentor Profile

OFFICE USE ONLY

Approved: _____

Date: _____

Student's Name	Term

Your Name:

Church/Institution Name:

Office Address, City, State, Zip code:

Office Phone:

Cell Phone:

Email: Age (optional):

Position held in church/institution:

Denominational affiliation: Yrs. In Min.:

District/Region/Conference: Ordination Status:

Educational Background:

College/Seminary/Cont. Ed. *Major* *Degree* *Year of Completion*

1.
2.
3.

Employment/Ministry Experience: (Last 4)

Where Employed *Position/Title* *Dates*

1.
2.
3.
4.

How do you live out servant-leadership in your ministry?

What role do you play in your congregation's small groups?

Describe how you mentor others in ministry.

What other training or experience do you have that will help you in your Mentor role?

Please give an overview of your church/ministry setting (mission, vision, location, history, methods, etc.)

Signature: _____ **Date:** _____

Please return this profile to:

Attn: Mentored Ministry Coordinator
Mentored Ministry Office
Asbury Theological Seminary
204 N. Lexington Ave.
Wilmore, KY 40390
859-858-2061/859-858-2057 fax
mentoredministry@asburyseminary.edu

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Comments: