

Thriving as Women in Ministry Mentoring Cohort Application

(For Pastors Who Want to Join a Cohort)

Part I: Applicant Information (Each cohort member should complete Part I)

ull Name
.ddress:
Street number and Name
City and State Zip code
none: (work) (cell)
mail address:
linistry context (select one): church nonprofit organization para-church other
hurch/organization you're currently serving:
ates of service (must be actively serving):
CC Credential: ML BVL OWSe OWSa
ate credentials received:
ow did you hear about this grant? (Select one)
Word of mouth Social media Website Other
emographic Information: Because this program is being funded by a grant, we would like to
ollect further information that can be used in reports or for further research. Responses to the
llowing questions are optional, but responses will assist us in our reporting process. Thank
ou for your help!
farital status: Single/never married Married Divorced Widowed
ge: 18-24 25-34 35-44 45-54 55-64 65-74 75-84 85 or older
ace/ethnicity:
umber of years in ministry:
CC Conference/ECCC location:

Part II: Tell us more about you
In what ways do you hope to grow as a result of the cohort experience?
What gifts do you bring to this experience that can be shared with the cohort?
Is there anything else you'd like us to know that will assist the process of placing you in a cohort?

