



2019 SUMMER STRETCH YOUTH MENTOR APPLICATION

Date of Application: _____

Applicant: *Please note that you must be currently attending High School or a Post High School graduate to apply to be a Summer Stretch Mentor.*

Please complete this application and return it to Chris Sims by May 5th 2019

Applicant Name:			Male/Female:	
(First)	(M.I.)	(Last)	M or F	
Date of Birth:	Age:	T-Shirt Size: S M L XL XXL		
School:	Grade (Current): 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> Post High School <input type="checkbox"/>			
Address:	Have you been involved with Summer Stretch before? Y or N		If yes, how many years as a leader?	
City, State, Zip:	Best way to communicate with you? Email <input type="checkbox"/> Text <input type="checkbox"/> FB pg <input type="checkbox"/> Phone <input type="checkbox"/>			
Cell Phone:	Applicant Email:	Do you have access to St. John's YOUTH FB page?: Y or N		
Emergency Contact:		Emergency Contact Phone:		
Parent(s)/Guardian Names:				
Address:			Does applicant reside at this address?	
City, State, Zip:				
Home Phone:		Cell Phone:		
Home Email:		Work Email:		
Please list other (non St. John's) leadership programs you have participated in:				
Work experience: (Most recent first)				
Extra-Curricular Activities: (Recreational, athletic, musical, church, etc.)				

How do you set aside time to be with God?

Please circle any words that best describe you, and cross out any words that least describe you:

trustworthy dependable athletic/active compassionate reliable self-starter punctual
flexible laid-back quick thinker spontaneous decisive teachable team player humorous
thoughtful solitary leader cautious risk taker patient reflective honest organized
creative disciplined faithful dreamer empathetic friendly green analytical
perceptive imaginative persistent open-minded cooperative positive introverted
extraverted problem solver adventurous impatient sensitive bold purple
orange tired random purposeful compliant rigid playful artistic musical

What kind of gifts/talents do you think God has entrusted to you?

In what way do you think your gifts, talents and abilities would be helpful as a Summer Stretch Mentor?

What are some things you would like to see us doing as a Summer Stretch group?

I understand that if I volunteer to be a mentor for the St. John's Summer Stretch program that I will be expected to be punctual, present and actively participating on the dates listed:

June 12, 19, 26, July 10, 17 and August 1 (Valleyfair)

Applicant Signature: _____ *** Parent Signature:** _____

*Parent signature required if applicant is under 18 years of age.

I have signed and turned in a St. John's Liability/Waiver form for the Summer Stretch 2018 Program

Yes _____ or No _____

