Men of VALOR

APPLICATION

CONTACT INFO

•	Name:
•	Address:
•	Email Address:
•	Cell Phone:
•	Age / DOB:
TEL	L US ABOUT YOU
•	Church Home / Length of Attendance:
•	Are you married? Y N (circle one). If yes, anniversary date:
•	Are you engaged? Y N (circle one). If yes, wedding date:
•	If married, is your wife attending a women's program?
•	What previous men's groups have you attended? How long were you involved?
•	How long have you been a Christian?
•	Explain your Salvation experience.
•	If not legally married, are you in a cohabitating (living together) relationship?
•	What specific areas do you struggle with in your walk with Christ? (Examples: unforgiveness, gossip, addictions, pride, family relationships, consistency). Please explain.

, , ,	•	, , ,	1 2 3 4 5 1 2 3 4 5
 being the most difficult making MOV a priority in the next nine months? Explain. (time, service to others, accountability to leadership) What do you see as your personal strength and/or gifting? What is the best way for your mentor to interact with you on a weekly or biweekly basis texts, personal visit? RATE YOURSELF IN THE FOLLOWING AREAS	•	Not at All Billioute, 6 Very Billioute	
being the most difficult making MOV a priority in the next nine months? Explain. (time, service to others, accountability to leadership)		What is the best way for your mentor to interact with you on a weekly or biwe texts, personal visit? TE YOURSELF IN THE FOLLOWING AREAS	eekly basis? Calls,
being the most difficult making MOV a priority in the next nine months? Explain. (time,	•		
	•	being the most difficult making MOV a priority in the next nine months? Explain	ain. (time, finances