



## Northeast Ohio Christian Medical and Dental Association Christian Healthcare Mentoring Program 2007-2008

### Mentoree Data Form (To facilitate matching)

Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Pager: \_\_\_\_\_

When and where are the best times to reach you?

\_\_\_\_\_

#### **If Applicable:**

Spouse's Name: \_\_\_\_\_

Spouse's Occupation: \_\_\_\_\_

Name(s)/Age(s) of Children: \_\_\_\_\_

#### **Education:**

Undergraduate College(s): \_\_\_\_\_

Undergraduate Major(s): \_\_\_\_\_

Post-graduate education: \_\_\_\_\_

#### **Religious/Church Experience:**

Denominational Background: \_\_\_\_\_

Church that you currently attend: \_\_\_\_\_

Groups or organizations—including "parachurch" groups—that have been/are important in your Christian life:

\_\_\_\_\_

\_\_\_\_\_

What is your current commitment to Jesus Christ? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Work Interests:**

In what kinds of work have you spent significant periods of time? \_\_\_\_\_  
\_\_\_\_\_

**Hobbies/Recreation Interests:**

Hobby Interests: \_\_\_\_\_

Recreational Interests: \_\_\_\_\_

Overseas/Transcultural Experience: \_\_\_\_\_

States, cities, and countries where you spent most of your time: \_\_\_\_\_  
\_\_\_\_\_

Indicate any preferences you have regarding your mentor (e.g. specialty, background, experiences, marital status, etc., although it is possible that all of these factors cannot be considered in the assignments). Male mentorees will be paired with male mentors, and female mentorees with female mentors.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Comments/Questions:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I wish to participate in the Christian healthcare mentoring program and I agree to take this commitment seriously. (By returning this I confirm this statement.)

Sign: \_\_\_\_\_

Date: \_\_\_\_\_

**Note: Please return this to Kevin El-Hayek at [elhayek@post.harvard.edu](mailto:elhayek@post.harvard.edu) or mail to**

**11850 Edgewater Dr. #303, Lakewood, OH 44107**