



Florida Mission Center Priesthood Mentoring Program

MENTORING EDUCATIONAL COMMITMENT FORM

GOAL: To assist ordinands in the: 1) pre-ordination education and learning requirements; 2) planning of the ordination service; and 3) post-ordination training for enhanced ministry.

PURPOSE: 1) To mutually commit to the educational development of the mentee; 2) to document the accomplishment of education requirements; and 3) to contract between the mentee, mentor, and congregational leadership to ensure the guidelines are completed.

Mentee Name: (Print Name) _____ (Signature) _____	Priesthood Office: _____ Commitment Date: _____
Mentor Name: (Print Name) _____ (Signature) _____	Commitment Date: _____

<input checked="" type="checkbox"/> Check as Completed	Temple School Requirements	Completion Date
<input type="checkbox"/>	SS101 Introduction to Understanding the Scripture	
<input type="checkbox"/>	SL101 Introduction to Caring Ministries	
<input type="checkbox"/>	Office Specific Course(s) [List]	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>	Additional Pre-Ordination Training / Education [List]	
<input type="checkbox"/>		
<input type="checkbox"/>		

<input checked="" type="checkbox"/> Check as Completed	Plan and Prepare for Ordination Service	Completion Date
<input type="checkbox"/>	Work with worship committee / team for planning service	
<input type="checkbox"/>	Identify key (significant) elements desired for service	
<input type="checkbox"/>	Review personal responsibilities for service	
<input type="checkbox"/>	Other [specify]	
<input type="checkbox"/>		



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✓ Check as Completed	Congregation-Specific Orientation	Completion Date
<input type="checkbox"/>	Orientation to Congregation-specific methods	
<input type="checkbox"/>	Orientation to specific congregational responsibilities: [List along with congregational ministry partner assisting with orientation]	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

✓ Check as Completed	Congregation-Specific Orientation	Completion Date
<input type="checkbox"/>	Role in ordinances / sacraments (e.g., offering collection procedure or serving communion process, etc.)	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

✓ Check as Completed	Specialized Areas of Training	✓ Check as Completed
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		

✓ Check as Completed	Evaluation of Mentoring Experience	✓ Check as Completed
<input type="checkbox"/>	Conduct final meeting between mentee and mentor to discuss mentoring experience (best to have personal contact)	
	Complete FMC Mentoring Evaluation Form	
<input type="checkbox"/>	Mentee (Phone # for follow-up):	
<input type="checkbox"/>	Mentor (Phone # for follow-up):	
<input type="checkbox"/>	Submit one copy to Congregational pastor and one to FMC Mentor Advisory Team with recommendations	