



***Discover Hope 517 Ministry  
Navigator/Mentor Application***

Please check all that apply. Applications may also be completed online at [discoverhope517.org](http://discoverhope517.org)

- I would like to be a mentor
  - Requires two references. New Mentors must submit two personal references. The reference requirement may be waived for DH Staff and Leadership team.
  - Upon approval, your name will be added to the list of possible mentors.
  
- I would like to be a Navigator
  - Requires two references. New Navigators must submit two personal references. The reference requirement may be waived for DH staff and Leadership team.
  - Upon approval, your name will be added to the list of possible navigator.
  
- I would like to receive a mentor and/or Navigator
  - No References required
  - After filling out this application, DH staff will contact you
  - Would you like a: Navigator      Mentor      **Please circle one or both**

**What is a Navigator?**

Navigators have themselves had success in recovery and are able to help someone in that transformation process in our New Life program. They are trained and equipped to have the skills and tools needed to assist the person they are assigned to walk with.

**What is a Mentor?**

Spiritual mentors are individuals grounded in the Christian faith. Our mentors are introduced during the later phase of the New Life program designed to transition the recoveree to a faith community for support and growth in their faith journey.

**We try to pair you up with those that have similar circumstances/experiences, so by answering these questions honestly, we can try to get you paired with someone that best fits with you and your current/past experiences.**

**Today's Date:** \_\_\_\_\_

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

**DOB/Age:** \_\_\_\_\_

**Email:** \_\_\_\_\_

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

**Phone #:** \_\_\_\_\_

**May we text?**

Yes

No

Male

Female

**Are you able to commit to meeting 1x per week for at least 30-60 mins for the next year?**

Yes

No

**How many individuals are you willing to help per week?** \_\_\_\_\_

**Which location(s) are you available to meet?** Check all that apply.

Newton

Pella

Knoxville

**Please note if you have a particular age you would prefer to mentor/navigate**

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**Please identify what statement(s) best describes you**

I don't believe in God

I believe in God, but that doesn't influence the way I live my life on a daily basis

I am seeking God and wanting to grow a deeper relationship with Him.

I do not go to Church on a regular basis

I do attend Church on a regular basis

I am growing daily in my faith and have others to encourage me.

**Do you have a home church? If so, where? \_\_\_\_\_**

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**Please provide a brief explanation of your personal spiritual growth and how that looks for you in your life right now.**

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**Please identify any skills, knowledge or experience that you think will help you as a Navigator/mentor.**

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**Have you ever been arrested?**

- Yes
- No

**If yes please briefly explain the circumstances**

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**Please list any hobbies or interests that could be shared mutually in your meetings.**

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**Have you ever been a victim of any form of abuse?**

- Yes
- No

If yes, please briefly explain the circumstances

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**Which of the following life experiences would you say have had an impact on shaping who you are today: Check all that apply**

- Marriage
- Divorce
- Parent
- Empty-Nest
- Single Parent
- Divorced Parents
- Addiction
- Job Loss
- Health/Wellness Issues (Diet, Exercise, etc.)
- Death of a loved one

**Career experience:**

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**Volunteer Experience:**

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**Spiritual Growth & Ministry Interests:** (Check all that apply)

- Christian Community
- Spending/Tithing/Finances
- Bible Study
- Leadership Development
- Prayer
- Fasting
- Other: Please explain:

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**Please include anything else you would like Discover Hope to know about you, your interests, or experiences that might impact your navigator/mentor relationship.**

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**If you are applying to be a Mentor, please indicate two personal references.** Your references will be contacted by the Mentor Coordinator.

\*Reference requirements will be waived for Discover Hope 517 Staff and Leadership Team.

**Reference #1**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Ema

**Reference #2**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

***Discover Hope Hold Harmless Agreement***

I understand that Discover Hope staff and those volunteering with Discover Hope are not professional or licensed counselors, therapists, medical or psychological practitioners (unless otherwise indicated).

I understand that information I may discuss will be kept confidential. However, I am aware that Discover Hope volunteers are mandated by law to intervene if suspect that child abuse (under age of 18 years) or elder (over 65 years), or a vulnerable adult is currently endangered by abuse or I am in danger to myself or others. \*

I understand that I am under no financial obligation and am free to leave the program at any time.

I deem the persons ministering to me through Discover Hope are encouragers in the Christian faith and are helping me by find my freedom in Christ. They are working with me by my own request.

I hereby release Discover Hope ministry, staff and volunteers from liability for all acts performed in good faith without malice in connection to this ministry.

Participant

signature \_\_\_\_\_ Date \_\_\_\_\_

***Confidentiality Agreement***

As a staff member/volunteer representing Discover Hope I will seek to minister the love of Jesus Christ to the above signed. I understand my role is to offer support, prayer, a listening ear and Christian guidance.

I understand in fulfilling my role I may be aware of information which is extremely personal and confidential to the ministry participant.

I understand that though I am not bound by a professional code of conduct I am bound by a Biblical code of justice, morality and love. Therefore, I will not under any circumstances divulge or share with anyone what has been shared with me by a ministry recipient (\*only if I deem endangerment as stated above). To do so would destroy the support and ministry that I am attempting to provide in Jesus' name.

I understand that this pledge of confidentiality will not expire at any time.

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

Spiritual  
Mentor \_\_\_\_\_ Date \_\_\_\_\_

Ministry  
Staff/volunteer \_\_\_\_\_ Date \_\_\_\_\_