

Carlisle Presbytery Mentor Program

Effective July 1, 2017

I. PURPOSE:

- a) Orient clergy, paid Christian educators, and paid youth directors new to the Carlisle Presbytery to the policies, procedures, personnel, and personality of the Carlisle Presbytery.
- b) Provide new clergy, paid Christian educators, and paid youth directors with a veteran colleague who is in a non-supervisory capacity to be a resource and to provide support.

II. APPLICABILITY: All clergy, paid Christian educators, and paid youth directors who are new to the Carlisle Presbytery or who are returning to the Carlisle Presbytery after an absence of seven (7) or more years.

III. MENTOR CRITERIA:

- a) The individual shall be a member in good standing of the Carlisle Presbytery or in one of our own congregations for a minimum of three (3) cumulative years.
- b) The individual shall participate in a mentorship orientation conducted by the Clergy Care Subcommittee of the Commission on Ministry of the duties and responsibilities associated with being a mentor.
- c) The individual should have experience with serving on a Carlisle Presbytery committee.
- d) The prospective mentor should possess the following characteristics
 - 1) A deep commitment to Jesus Christ
 - 2) A pastoral Heart
 - 3) A commitment to the Presbyterian Church (USA)
 - 4) A sincere desire to build constructive, positive relationship between Mentor/Mentee
 - 5) An ability to listen
 - 6) A sensitivity to people of different educational, economic, cultural and racial backgrounds
 - 7) A positive attitude
 - 8) Compassion/understanding
 - 9) Dependability
 - 10) An ability to recommend alternatives and options
 - 11) An openness to learning
 - 12) A sense of humor
 - 13) Integrity
 - 14) Leadership
 - 15) Organizational skills

IV. RECRUITMENT AND ASSIGNMENT OF MENTOR:

- a) The Clergy Care Subcommittee of the Commission on Ministry creates a pool of potential mentors.

- b) The Clergy Care Subcommittee of the Commission on Ministry will assign the mentor considering the following:
 - 1) Ministry Size (small to small, medium to medium, etc.)
 - 2) Solo or Multiple Pastors
 - 3) Prior experience in a similar type position (Chaplaincy)
 - 4) Input from the potential mentee
- c) Individuals serving in the capacity of a mentor are to adhere to the following guidelines.
 - 1) Maintain confidentiality of meetings and conversations.
 - 2) Correspond/Communicate with the mentee in a timely manner, within 48 hours.
 - 3) Use the suggested topics listed in Appendix A as a starting point for discussion with the mentee.
 - 4) Listen to the questions and concerns of the mentee to assist in their transition into the Carlisle Presbytery.
 - 5) Complete a one page Mentor Information Sheet (see Appendix B) indicating a desire to be a mentor.
 - 6) Complete the minimum required meetings.
 - 7) Be a supporter of the mentee
- d) The Clergy Care Subcommittee submits its recommended mentor-mentee assignment to the Commission on Ministry for its approval.

V. LENGTH AND FREQUENCY:

- a) The relationship between the mentor and mentee will be for a minimum of one (1) year.
- b) There will be a minimum of at least 6 meetings with three being conducted in the first, second and fourth months. The remaining three (3) meetings are at the discretion of the mentor and mentee.
- c) In the instance of a person returning to the Presbytery after an absence of seven (7) or more years, the requirement is for a minimum of three (3) meetings within a year.

VI. DOCUMENTATION:

- a) The individuals will sign a statement at the end of the year attesting to that they meet the requirements of the Carlisle Presbytery Mentor Program.
- b) This statement is filed with the Stated Clerk of the Carlisle Presbytery.

Appendix A to the Carlisle Presbytery Mentor Program
Suggested Topics

- a) Presbytery structure
- b) Presbytery Committees and their mission
- c) Presbytery resources
- d) Sermon development and topics
- e) Spiritual life, Prayer, and Devotional Life
- f) Family, Marriage, and Children
- g) Continuing Education and study habits
- h) Physical fitness, health, and medical care
- i) Collegiality and friendships
- j) Conducting Session meetings
- k) Reaching the varied congregational populations (children, youth, young adults, long time members, etc.)
- l) Identifying and relating to the unofficial church leadership
- m) Time management
- n) Setting personal boundaries between church and private lives
- o) Finances (church, personal, clergy taxes)
- p) Boundary Training
- q) Self-Care
- r) Visitation (Home, Hospital, and Nursing Homes)
- s) New Member Class
- t) Choir and music ministry
- u) Youth and adult education
- v) Community needs and involvement
- w) Approaching and making changes
 - a. Altering service sequence
 - b. Committees
 - c. Beginning or ending church programs

Appendix B to the Carlisle Presbytery Mentor Program
Carlisle Presbytery Mentor Information Sheet

I: PERSONAL INFORMATION

NAME			
STREET ADDRESS			
CITY, STATE ZIP			
PHONE	HOME	MOBILE	
E-MAIL ADDRESS			
ORDINATION YEAR			
MARITAL STATUS		MARRIED	SINGLE
CHILDREN		YES	NO

II. CHURCH/MINISTRY INFORMATION

NAME OF ORGANIZATION			
YOUR POSITION			
STREET ADDRESS			
CITY, STATE ZIP			
PHONE			
E-MAIL ADDESSS			
MINISTRY FOCUS			
MINISTRY SIZE	SMALL < 100	MEDIUM 101-400	LARGE > 400

III. CARLISLE PRESBYTERY SERVICE

MINISTRY NAME	FROM –YEAR	TO-YEAR
COMMITTEE NAME	FROM-YEAR	TO-YEAR

IV. PLEASE LIST THE STRENGTHS YOU BRING TO THIS PROGRAM

Appendix C to the Carlisle Presbytery Mentor Program
Carlisle Presbytery Mentee Information Sheet

I: PERSONAL INFORMATION

NAME			
STREET ADDRESS			
CITY, STATE ZIP			
PHONE	HOME	MOBILE	
E-MAIL ADDRESS			
ORDINATION YEAR			
MARITAL STATUS		MARRIED	SINGLE
CHILDREN		YES	NO

II. CHURCH/MINISTRY INFORMATION

NAME OF ORGANIZATION			
YOUR POSITION			
STREET ADDRESS			
CITY, STATE ZIP			
PHONE			
E-MAIL ADDESSS			
MINISTRY FOCUS			
MINISTRY SIZE	SMALL < 100	MEDIUM 101-400	LARGE > 400

III. PREVIOUS CHURCH/MINISTRY INFORMATION (If Applicable)

PRESBYTERY NAME, CITY, STATE			
NAME OF ORGANIZATION			
YOUR POSITION			
STREET ADDRESS			
CITY, STATE ZIP			
PHONE			
E-MAIL ADDESSS			
MINISTRY FOCUS			
MINISTRY SIZE	SMALL < 100	MEDIUM 101-400	LARGE > 400

IV. PLEASE ATTACH YOUR STATEMENT OF FAITH TO THIS DOCUMENT