

ALM Mentor Application Form

Applicant Details	
Full Name:	
Title:	
Address:	
Telephone number:	
Email address:	
Parish:	
Are you DBS checked? If so, please give DBS number & date issued.	YES/NO
Ministry & Leadership Experience	
Current role/s in Parish ministry:	
Other relevant experience:	
Why would you like to be an ALM Mentor?	
How many ALM candidates could you mentor over one year?	

Reference Details	
<i>Please give the details of someone who can support your application to be an ALM Mentor (preferably your Parish Incumbent)</i>	
Name & Title:	
Address:	
Telephone number:	
Email address:	

Please tick the following statements showing your agreement with the requirements of an ALM Mentor:

- I will be available to meet with a minimum of one ALM candidate over four sessions to discuss their training.
- I will participate in initial training sessions for ALM mentors.
- I will treat discussions with ALM candidates with strict confidentiality.
- If a major concern is raised that would impact upon a candidate's ability to lead and minister in their local church, I will inform the Lay Training Officer or Warden of Lay Ministry.

Signed: _____

Date: _____

Data Protection

The information you supply on this form will be used by Blackburn Diocese in accordance with current Data Protection legislation (The General Data Protection Regulation and Data Protection Act 2018). From the point at which your application is received, it is necessary for Blackburn Diocese to hold and process a certain amount of your data in both printed and electronic formats, which will be held securely with limited protected access. Processing the data requested is necessary for the purposes of implementing, administering and managing training programmes in Blackburn Diocese, ensuring your health and safety, identifying and meeting any training and development needs, contacting you regarding training and related administrative matters.

Declaration: I have read and understood how Blackburn Diocese intend to process data pertaining to my application. I consent to the processing of my personal data as described above	
Signed:	Date: