**KingsCompass The Christian Coach Academy™**

**Mentoring and Supervision Questionnaire**

*This is a word document so you can type in responses and return by email.*

You are invited to prayerfully respond to the following questions as well as provide any further information that might be helpful in advance of a first meeting.

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| --- | --- |
| Name: | Address: |
| Email: |  |
| Mobile: |  |
| Are you seeking Supervision or Mentoring and what has prompted this? |  |
| Are you seeking supervision or mentoring as an independent coach or do you have organisational support? |  |
| Tell us a little bit about you, your coaching background, training and experience to date. |  |
| How is Christian faith currently integrated into your practice? |  |
| Have you been supervised or mentored previously? Please give details. |  |
| What specifically would you like to gain from the supervision/mentoring relationship? |  |
| What specific competencies or aspects of practice would you like to grow in? |  |
| What challenges or barriers do you think you need to overcome to achieve this/these? |  |
| If the mentoring or supervision relationship is a success how would you be different? |  |
| How frequently would you like to meet? |  |
| How motivated are you to take responsibility for the management of your supervision and mentoring journey? |  |
| What might get in the way and what will you do to stop this stopping you? |  |
| What else might be helpful to another seeking to support your development as a Christian faith-based Coach? |  |
| I give consent for my details to be shared for the purposes of this application  I give consent to receiving KingsCompass updates.  Name  Date  (may be confirmed by email) |  |

Please forward your completed application to [carole@kingscompassthechristiancoachacademy.org](mailto:carole@kingscompassthechristiancoachacademy.org)

indicating times when a video conversation would be convenient.