



New DiaBuddies Mentor Application

Name: _____

Email: _____ Phone: _____

Address: _____

Gender: Male Female Date of Birth: _____

Type of diabetes: I II Year of diabetes diagnosis: _____

Do you use an insulin pump? Yes No Continuous Glucose Monitor? Yes No

How did you hear about the JDRF-DiaBuddies Mentor Program?

Why are you interested in becoming a DiaBuddies Mentor?

What are your strengths related to diabetes that, as a mentor, you could encourage or model to someone else (check all that apply)?

Improved control with multiple daily injections

Improved control with an insulin pump

Using a continuous glucose meter

Exercise with diabetes (sports, working out, dance)

Travel with diabetes

Diet & nutrition

Handling social issues with diabetes

Having a healthy attitude about life with diabetes

Other: _____

Please share any other information with us that is relevant to your experience with diabetes, motivation to help others, or the ways in which you are living successfully with diabetes:

Email to: jwilke@jdrf.org or mail to:
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San Diego, CA 92121