



# The MentoRing<sup>©</sup> on “Barriers”

**Purpose:** Participating in the MentoRing<sup>©</sup> raises your self-awareness, increases your ability to focus on what is important, and enhances your communication style and effectiveness. Sharing your responses allows you to put into words challenges you may have and could better handle with encouragement from others. The process also allows others to observe strengths and potential that you are unable to see in yourself. The MentoRing furthers educating, mentoring, and leading—the spirit of WOVI.

**Instructions:** Record your answer. In the initial round, participants reveal their answers and speak for only 60 seconds. Use the MentoRing worksheet to make notes or comments about each response, if needed. In the second round, focus on one person at a time and provide positive comments and support. Continue until each participant has received observations from all group members. Speak only 60 seconds so that all have equal time to respond and to obtain feedback. Keep all comments encouraging, helpful, and supportive!

**Are there barriers that prevent you from accomplishing a task or goal? If so, are they of your own making and what are they? What impact do they have on your potential and actions?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**-- PLEASE RESPECT THE TIME CONSTRAINTS --**

**ABOUT YOU:** Observations and remarks you want to keep that you receive from other members of the MentoRing.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**ABOUT OTHERS:** Use the space below to make notes from others’ comments about themselves.

Name \_\_\_\_\_  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_