

# SPIRITUAL GIFTS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Male  Female Date of Birth: \_\_\_\_-\_\_\_\_-\_\_\_\_  
Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_  
Do you have any children?  No  Yes Ages: \_\_\_\_\_

## Spiritual gifts I believe I have (from list in syllabus):

1.

2.

3.

I believe I may have these gifts because:

1.

2.

3.

# HEART

## What I have a heart for, or what motivates me most (from list in syllabus):

•I love to

•I love to

•I love to

Who I love to work with most, and the age or type of people:

Church issues, ministries, or possible needs that excite or concern me most:

If I knew I couldn't fail, this is what I would attempt to do for God with my life:

# ABILITIES

## My current vocation is:

Other jobs or skills I have experience in:

I feel I have these specialized abilities (from list in syllabus):

I have taught a class or seminar on:

I feel my most valuable God given ability is:

# PERSONALITY

*This is how I see myself (mark with x):*

**Extroverted (Where do I get my energy?)      Introverted**

3	2	1	1	2	3
extreme		mild	mild		extreme

**Routine (What kind of tasks do I prefer?)      Variety**

3	2	1	1	2	3
extreme		mild	mild		extreme

**Self-Controlled (How do I like to express myself?)      Self-Expressive**

3	2	1	1	2	3
extreme		mild	mild		extreme

**Cooperative (How do I typically relate to others?)      Competitive**

3	2	1	1	2	3
extreme		mild	mild		extreme

# EXPERIENCES

## MY SPIRITUAL JOURNEY

This is how and when I became a Christian, and what it has meant to me since then:

Have you been baptized by immersion (under water) after you committed your life to Christ?

- Yes    When \_\_\_\_\_                      Where \_\_\_\_\_
- No

Times when I have felt closest to God, and meaningful spiritual experiences that stand out in my mind:

# EXPERIENCES

(Cont'd)

Name of Bible Institute Class you are attending:

\_\_\_\_\_ Date Started

Name of leader of Small Group you attend:

\_\_\_\_\_ Date Started

Did you join a Small Group as a result of attending the 201 Seminar?

Yes       No

## **MY PAINFUL EXPERIENCES**

These are the kinds of trials or problems I can relate to and could encourage a fellow Christian who is going through:

## **MY EDUCATIONAL EXPERIENCES**

Where I attended school, my major, and my favorite subjects:

Seminars or training that has been meaningful to me:

## **MY MINISTRY EXPERIENCE**

Where I have served in the past (if applicable):

<b>Name of church</b>	<b>Where</b>	<b>Position of service</b>	<b>Years involved</b>
1. _____			
2. _____			
3. _____			

I started attending Neighborhood Church on \_\_\_\_\_ (date).

Current Neighborhood Church Service (if applicable):

<b>Ministry</b>	<b>Position of service</b>	<b>Months involved</b>
1. _____		
2. _____		
3. _____		

# EXPERIENCES (Cont'd)

If applicable, which 101 Welcome Ministry (e.g., Children's Ministry, Coffee/Donuts, Communion Team, Greeter, Life Dev. Team, Traffic Monitor, Usher, etc.) do you currently serve in as a result of attending the 101 Seminar?

Ministry	Ministry Position	Date Started
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Please list any current volunteer service outside Neighborhood Church (if applicable):

Organization	Position of service	Months involved
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### TO BE FILLED OUT AT YOUR APPOINTMENT WITH YOUR MINISTRY ADVISOR

After reviewing the Ministry Descriptions, I feel I am best "shaped" for:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Advisor:** \_\_\_\_\_ **Interview Date:** \_\_\_\_\_

*When you have completed this form, print it out and drop it off at the Neighborhood Church office, or save it and email a copy to [maria@3crosses.org](mailto:maria@3crosses.org)*