

# Life Group Leader Form



Please complete the following form, completing all applicable fields. A representative from Family Church will be contacting you shortly. Thanks for your desire to join us in leading people into a growing relationship with Jesus Christ through our groups environments.

## GENERAL INFORMATION

Desired Group Type: Traditional Bible Study Common Ground Celebrate Recovery  
Position: Leader Facilitator  
Time you wish to meet: Wed 6:30-8:30PM Sun 6:00-8:00PM Sun 9:15-10:15AM  
Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Occupation \_\_\_\_\_ Employer \_\_\_\_\_

## FAMILY INFORMATION (IF APPLICABLE)

Spouse's Name \_\_\_\_\_ Wedding Anniversary \_\_\_\_\_  
Children's Names \_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_  
\_\_\_\_\_ DOB \_\_\_\_\_

## CHURCH-RELATED INFORMATION

Are you a member of Family Church? No Yes How Long? \_\_\_\_\_ Years \_\_\_\_\_ Months  
Are you in agreement with the doctrine of Family Church? No Yes  
Are you in agreement with the Vision of Family Church? No Yes  
Are you consistent in tithing as described in the Bible? No Yes  
Have you ever been on an Encounter Retreat? No Yes  
Have you been through our School of Leaders? No Yes If partial, about how long? \_\_\_\_\_  
Have you ever been in a Small group? No Yes  
Are you currently in a Small group? No Yes If yes, who is the leader? \_\_\_\_\_  
If you become a group leader, which Generational Group Pastor would you like to server under?  
Preference #1 \_\_\_\_\_ Preference #2 \_\_\_\_\_  
Current areas of service at Family Church \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
Previous church background \_\_\_\_\_  
Denominational background \_\_\_\_\_  
Former Church Name \_\_\_\_\_ Former Church Phone \_\_\_\_\_  
Leadership experience or training \_\_\_\_\_  
Previous church leadership experience \_\_\_\_\_  
Recent (last 3 years) relevant Christian or leadership-related training \_\_\_\_\_

Have you ever led a small group? No Yes  
If yes, please explain your experience \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PERSONAL INFORMATION

List any known Spiritual Gifts \_\_\_\_\_  
Have you ever lead anyone to Christ? No Yes  
How long have you been a Christian? \_\_\_\_\_  
Have you been baptized? No Yes When? \_\_\_\_\_ By Whom? \_\_\_\_\_  
Please briefly describe when and how you accepted Jesus Christ as your personal Savior (Attach another sheet if necessary) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe what steps you are currently taking to grow in Christ? (i.e. what are you reading in the Bible?; what Christian books are you reading?; what CDs/messages/teachers are you listening to?; are you in a particular Bible study now) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_