



MINISTRY ASSIGNMENT FACT SHEET

Date: _____

PERSONAL DATA:

Name: _____

Date of Birth: _____

Phone Number: _____

Email: _____

Marital Status:

- Legally Married Hmong Married Widow/Widower Divorced Single

General Education: _____

Theological Education:

- TEE I/CLA TEE II (MSP) Other: _____

Classes/Seminars (please list): _____

SPIRITUAL FORMATION:

Confession of Faith (Date): _____

Baptism (Date): _____

Describe your 'born again' experience: _____

Please describe your walk with Christ since that new birth: _____

MINISTRY EXPERIENCES:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Auditors | <input type="checkbox"/> Greeters | <input type="checkbox"/> Ushers |
| <input type="checkbox"/> Board | <input type="checkbox"/> Men | <input type="checkbox"/> Vocal |
| <input type="checkbox"/> Children | <input type="checkbox"/> Multimedia | <input type="checkbox"/> Women |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Play Instrument | <input type="checkbox"/> Worship |
| <input type="checkbox"/> Deacon/Deaconess | <input type="checkbox"/> Preaching | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Evangelism | <input type="checkbox"/> Short Term Mission | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Facility Management | <input type="checkbox"/> Small Group | _____ |
| <input type="checkbox"/> Fellowship Group | <input type="checkbox"/> Teaching | <input type="checkbox"/> None |

SPIRITUAL GIFTED AREA(S):

If known: _____

If not, would you be interested in taking an assessment? Yes No

MINISTERIAL INTERESTS:

Administration:

- | | | |
|--|--|----------------------------------|
| <input type="checkbox"/> Auditors | <input type="checkbox"/> Event Planning | <input type="checkbox"/> Office |
| <input type="checkbox"/> Board | <input type="checkbox"/> Facility Management | <input type="checkbox"/> Ushers |
| <input type="checkbox"/> Communication | <input type="checkbox"/> Finance | <input type="checkbox"/> Website |

Audio Visual:

- Sound Stage IT

Discipleship:

- Children Ministry (please specify below):
 Infant care Toddlers 1st/2nd Graders 3rd/4th Graders 5th/6th Grader

Men Ministry (please specify below):

- Coordinators Event Planning Bible Study

Women Ministry (please specify below):

- GGs Fellowship Support Groups

Youth Ministry (please specify below):

- Youth Sponsors Support Teaching

Teaching (please specify below):

- TEE Bible Other: _____

Evangelism/Mission (please specify below):

- Local Outreach Short Term Mission Mission Committee

Hmong Ministry (please specify below):

- Leading Bible Study Worship Visitation

Supporting Ministry (please specify below):

- Deacon/Deaconess Midweek Service Counseling

Worship (please specify below):

- Choir Guitar Drum Flute Percussion Piano Violin
 Vocal Other: _____

PERSONAL GROWTH:

Not everyone is ready for ministry assignment. It takes time to grow and learn. You know yourself better than anyone else. So, in your own words, please tell us what you would need to participate more in the ministry of ELC.
