



Discipleship Profile

Name _____

Date _____

Email _____

Home Phone _____

Class/Instructor _____

Cell Phone _____

STAGE OF DISCIPLESHIP – I would consider myself:

- | | | |
|---------------------------------------------------|----------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> 1. Seeker | <input type="checkbox"/> 2. Growing Believer | <input type="checkbox"/> 3. Seasoned but Restless |
| <input type="checkbox"/> 4. Desiring to go Deeper | <input type="checkbox"/> 5. Fully Connected | <input type="checkbox"/> 6. Servant Leader |

SPIRITUAL GIFTS – My five (5) or six (6) highest scoring Spiritual Gifts are:

- | | | |
|-----------------------------------------|----------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Helps | <input type="checkbox"/> Pastor |
| <input type="checkbox"/> Apostle | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Poverty |
| <input type="checkbox"/> Battle | <input type="checkbox"/> Humor | <input type="checkbox"/> Prayer Language |
| <input type="checkbox"/> Craftsmanship | <input type="checkbox"/> Intercessory Prayer | <input type="checkbox"/> Prophecy |
| <input type="checkbox"/> Discernment | <input type="checkbox"/> Interpretation | <input type="checkbox"/> Service |
| <input type="checkbox"/> Evangelism | <input type="checkbox"/> Knowledge | <input type="checkbox"/> Singleness |
| <input type="checkbox"/> Exhortation | <input type="checkbox"/> Leadership | <input type="checkbox"/> Spirit-Music |
| <input type="checkbox"/> Exorcism | <input type="checkbox"/> Martyrdom | <input type="checkbox"/> Suffering |
| <input type="checkbox"/> Faith | <input type="checkbox"/> Mercy | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Giving | <input type="checkbox"/> Miracles | <input type="checkbox"/> Wisdom |
| <input type="checkbox"/> Healing | <input type="checkbox"/> Missionary | |

STYLE FOR MINISTRY – My personal style (personality - preferred environment) is: *(mark only one)*

- | | |
|---------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Extrovert – Stable | <input type="checkbox"/> Extrovert - Flexible |
| <input type="checkbox"/> Introvert - Stable | <input type="checkbox"/> Introvert – Flexible |

DREAMS / PASSIONS – I sense I have a passion for: *(mark all that apply)*

- | | | |
|-----------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Administration/Office Support | <input type="checkbox"/> Employment Assistance | <input type="checkbox"/> Music |
| <input type="checkbox"/> Adoption | <input type="checkbox"/> Environment | <input type="checkbox"/> Organization |
| <input type="checkbox"/> Adults | <input type="checkbox"/> Families/Marriage Enrichment | <input type="checkbox"/> Orphans/Foster Care |
| <input type="checkbox"/> Art (graphic, drawing, computer) | <input type="checkbox"/> Financial Education | <input type="checkbox"/> Prisons/Gangs |
| <input type="checkbox"/> Building (setup, construction) | <input type="checkbox"/> Grief Assistance | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Children | <input type="checkbox"/> Health Care | <input type="checkbox"/> Refugees/Immigrants |
| <input type="checkbox"/> Christian Education | <input type="checkbox"/> Hospitality/Greeting | <input type="checkbox"/> Students – Middle School |
| <input type="checkbox"/> Civil Rights | <input type="checkbox"/> Housing Needs | <input type="checkbox"/> Students – High School |
| <input type="checkbox"/> College/Young Adult | <input type="checkbox"/> Hunger | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> Crafts/Decorating | <input type="checkbox"/> Infants | <input type="checkbox"/> Technical Skills |
| <input type="checkbox"/> Disabilities/Special Needs | <input type="checkbox"/> Justice/Wrongs | <input type="checkbox"/> Teen Moms |
| <input type="checkbox"/> Disaster Relief | <input type="checkbox"/> Literacy | <input type="checkbox"/> Theater Arts |
| <input type="checkbox"/> Discipleship | <input type="checkbox"/> Local Missions | <input type="checkbox"/> Tolerance/Diversity |
| <input type="checkbox"/> Divorced/Blended Families | <input type="checkbox"/> Media | <input type="checkbox"/> Women’s Ministries |
| <input type="checkbox"/> Education | <input type="checkbox"/> Men’s Ministries | <input type="checkbox"/> World Missions |
| <input type="checkbox"/> Elderly | <input type="checkbox"/> Multi-Cultural Community | <input type="checkbox"/> Worship |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Offering HOPE ~ Transforming LIVES

TALENTS / RESOURCES - Please indicate any/all talents, training, previous work experience, and resources:

- | | | |
|------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> Art _____ | <input type="checkbox"/> Financial | <input type="checkbox"/> Music – Vocal |
| <input type="checkbox"/> Audio/Visual | <input type="checkbox"/> Food Services | <input type="checkbox"/> Notary |
| <input type="checkbox"/> Biblical Knowledge | <input type="checkbox"/> Fundraising/Grant Writing | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Commercial Driver’s License | <input type="checkbox"/> Greeting/Reception | <input type="checkbox"/> Office support (front desk, phones) |
| <input type="checkbox"/> Chiropractic | <input type="checkbox"/> Horticulture | <input type="checkbox"/> Office support (copy, mailings) |
| <input type="checkbox"/> Coach: _____ | <input type="checkbox"/> Interior Design | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Construction | <input type="checkbox"/> IT / Computers | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Crafts/Handiwork | <input type="checkbox"/> Legal _____ | <input type="checkbox"/> Social Work |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Medical _____ | <input type="checkbox"/> Teaching _____ |
| <input type="checkbox"/> Dental | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Engineer | <input type="checkbox"/> Music – Dance | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Event Planning | <input type="checkbox"/> Music – Instrumental | <input type="checkbox"/> Other: _____ |

Professional Services or Contacts (*please specify*): _____

Notes – please provide any additional details of the above that you feel would benefit God’s ministries:

AVAILABILITY (*please note specific days / times*):

- Weekdays _____ Weeknights _____ Weekends _____
- Summer School Year Occasional Other: _____

EXPERIENCES: What experiences and circumstances in your life are you currently experiencing God’s nudging to offer up in ministry?

CURRENT INVOLVEMENT – I am already involved in the following area(s) of discipleship:

Sunday School / Small Groups: _____

Ministry / Service: _____

POSSIBLE AREAS OF MINISTRY – Now that I know and understand my spiritual gifts, the specific ministry area(s) at Custer Road that I would like to learn more about is/are:

CONTACT? – I would like to be contacted by a Connector: Yes No