



COMMIT to SERVE in MINISTRY

*You must complete Discipleship Training before submitting this form.
Please place this form in the Christian Education mailbox.*

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved <input type="checkbox"/> Date Received <input type="checkbox"/> More Info Needed	COMMENTS / SUGGESTIONS
---	-------------------------------

Name _____ Date _____

Address _____ Phone _____

City & Zip code _____ Email _____

Date of Discipleship Training completion _____

What ministry or ministries did you observe? _____

What MINISTRY have you been called to SERVE?

*PLEASE READ Romans 12: 6-8, Ephesians 4:11, I Peter 4: 9-11, & I Corinthians 12:7-10 & 28-30.
From your reading, PLEASE RECORD the spiritual gift(s) and/or talent(s) that you bring to this ministry:*

What leadership role(s) did you serve in your previous church? _____

What is your present career/occupation? _____ Past occupations _____

Other gifts and/or talents, please check.

- | | | | | | |
|--|-------------------------------------|--|---|---------------------------------------|--|
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> Editing | <input type="checkbox"/> Medical Fields | <input type="checkbox"/> Barber | <input type="checkbox"/> Carpentry | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Management | <input type="checkbox"/> Painting | <input type="checkbox"/> Music Instruments | <input type="checkbox"/> Web Design | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Filing |
| <input type="checkbox"/> Business | <input type="checkbox"/> Law | <input type="checkbox"/> Leadership | <input type="checkbox"/> Speaking | <input type="checkbox"/> Bereavement | <input type="checkbox"/> Counselor |
| <input type="checkbox"/> Presentations | <input type="checkbox"/> Art/Crafts | <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Beautician | <input type="checkbox"/> Food Service | <input type="checkbox"/> Interior Decorating |
| <input type="checkbox"/> Video Recording | <input type="checkbox"/> Singing | <input type="checkbox"/> Hospitality | <input type="checkbox"/> Floral Design | <input type="checkbox"/> Dance | <input type="checkbox"/> Sound Systems |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Displays | <input type="checkbox"/> Photography | <input type="checkbox"/> Health / Fitness | <input type="checkbox"/> Writing | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Auto Detailing | <input type="checkbox"/> Training | <input type="checkbox"/> Curator/Historian | <input type="checkbox"/> Sewing | <input type="checkbox"/> Teaching | <input type="checkbox"/> Safety/Security |

Others: _____

