

# Spiritual Health Check Up

*Return to the pastor once completed.*

**Leader's name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

What are you doing to personally strengthen your relationship with Christ? Please describe.

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Are you involved in a small group? Which one?

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Are you faithful in financially-supporting our church?

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Do you sense that God has you in a place where now is the right time to be a leader at New Life?

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How will this ministry fit into your present work and family duties?

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How supportive is your spouse of your increased responsibility in ministry?

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In what way do you feel that you are prepared for the greater accountability that comes with a more visible role at church?

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What, if anything, in your life may reflect poorly on Christ and the church?

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What else would you like to share about your spiritual readiness to lead?

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Reviewed by \_\_\_\_\_ (name of staff member) \_\_\_\_\_