



## Ministry Leader Questionnaire

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Ministry Position: \_\_\_\_\_

1. What part(s) of your current responsibilities do you enjoy the most?
2. What Part (s) of your current responsibilities do you least enjoy?
3. What 3 things would you most like to change concerning your responsibilities?
4. What strengths do you bring to your ministry?
5. What areas do you most need to grow in to better function in your ministry position?
6. If married, how does your spouse support and help in your ministry?
7. What support, resources, or training could be supplied to help you minister better?
8. What do others at Joy frequently ask you to do for them that support your strengths and gifting?
9. Please highlight the areas on your SOI that are especially true of you.