

Evaluation Form

CONCERNING THE MINISTRY OF

_____ (NAME)

AS THE MINISTRY LEADER

OF THE _____ (AREA)

OF _____ (CHURCH)

FROM _____ (DATE) TO _____ (DATE)

THROUGH THE CHURCH MINISTRIES-LEADERSHIP PROGRAM

Thank you for completing this evaluation form. Its purpose is to help the ministry leader, church leaders, and the area Ministries- Program staff to evaluate the services of the ministry leaders in our church. Such evaluation will help to discover areas of strength and weakness, enabling the leader to continue to grow in effectiveness as a church leader.

Your signature is not required. A collation of these forms will be shared with the church's official leaders, the eldership, and the Senior Minister- Ministry leader Program.

I. How would you rate the Ministry Leader:

1. As a Area Leader?

_____ Exceptionally effective

_____ Quite effective

_____ Effective

_____ Somewhat effective

_____ Not effective

_____ No basis for judgment

2. In terms of ministry leader (calling, communicating, etc.)?

_____ Exceptionally effective

_____ Quite effective

_____ Effective

_____ Somewhat effective

_____ Not effective

_____ No basis for judgment

3. As an area organizer?

_____ Exceptionally effective

_____ Quite effective

_____ Effective

_____ Somewhat effective

_____ Not effective

_____ No basis for judgment

4. As a bible class/worship participation?

_____ Exceptionally effective

_____ Quite effective

_____ Effective

_____ Somewhat effective

_____ Not effective

_____ No basis for judgment

5. As a bible teacher/counselor?

_____ Exceptionally effective

_____ Quite effective

_____ Effective

_____ Somewhat effective

_____ Not effective

_____ No basis for judgment

