



Oread Center Student Leadership Questionnaire

personal information

Full Name:	
Year in School:	
Expected Graduation Date:	
Email Address:	
Cell Phone:	
Relationship Status:	
Major:	

Where are you currently serving? (This could include ministry teams, leadership roles, church volunteering, school clubs, etc.) How many hours per week?

Are you working? Where and how many hours per week?

Are you involved in a Bible Study? Are you leading or participating?

Please give a short testimony of your faith in Christ. (length is up to you)

Can you give us two areas of strength in your life and two areas where you'd like to improve?

Ministry Experience and Gifts

On a scale of 1 to 5, with 1 being the least and 5 the greatest, please rate (using an “x”) where you feel most gifted and comfortable. Feel free to comment within each category if need be.

	1	2	3	4	5
Teaching					
Discipling					
Planning					
Evangelism					
Gathering People/ Socials					
Leading Bible Studies					
Service					
Listening					
Music (specify)					
Administration					
Counseling					

Self-Description

Please circle the words that best describe you, and cross out words that least describes you.

trustworthy dependable active compassionate reliable self-starter

punctual leader flexible quick thinker spontaneous decisive

teachable team player humorous thoughtful solitary

cautious risk taker patient reflective

honest organized creative disciplined faithful