

Initial Application for Small Group Leaders

Name: _____

Address: _____

Email: _____

Please only list numbers that you want us to contact you and indicate which one is okay to leave a message.

Cell Phone: _____

Home: _____

Work: _____

In a brief paragraph please list why you would like to lead a group at this time.

Please indicate what you believe are your qualifications to be a group leader are:

Please describe the group that you want to lead; be sure to include the audience, materials you need, how long and when you would like to meet, and if the group will be an open or closed group.

Are you in agreement with the Church's doctrinal statement? Yes ___ No ___
(A copy is available on the Church website.)

Will you aspire to follow the qualities of a small group leader? Yes ___
No ___