MEMBER PROFILE SHEET

Name:		Age:	Ages of children
Years an SDA:	Years a member here	e	Sex: M F Marital Status: M S D
TIME ANALYSIS:	Current hrs. /month	Pre	ferred hrs. /month
SPIRITUAL GIFTS: Top six gi	fts and the score for each:		
Gift #1	Score	Gift #4	Score
Gift #2	Score	Gift #5	Score
Gift #3	Score	Gift #6	Score
MINISTRY EXPERIENCE: Mo	st satisfying ministries:		
1. 2. 3.			
TEMPERMENTS: (indicate s	core for each)		
Choleric	Melancholy	Sanguine	Phelegmatic
ABILITIES:			
1. Top four Talents/Hobbie A. B. C. D.	es		
2. Top three Traits/Charact A. B. C.	teristics		
CONVICTIONS: (Strongest of	onvictions for ministry)		
SUPPORT SYSTEM: (Describ	e)		

When form is completed, submit to Personal Ministries Leader, or assigned Member Profile custodian.