

Titus 2 Discipleship ~ CBC Women's Ministry

Discipler Application

All Information on this application will be kept confidential.

Date: _____

Getting to Know You

Name: _____ Birth date: _____ Year: _____

Address: _____ City: _____ Zip: _____

Major Cross Streets: _____

Phone Numbers

Home: _____ Work: _____ Cell: _____

Email Address: _____

Marital Status: Married Divorced Single Widowed

Spouse: _____ Anniversary: _____

Children	Age
_____	_____
_____	_____
_____	_____
_____	_____

If Employed ... Employer: _____ Occupation: _____

Major Cross Streets: _____

How long have you attended CBC? _____ Where did you previously attend? _____

What are your past and present ministry involvements?

Why would you like to be a discipler? What are your expectations and hopes?

Have you been involved in a discipling relationship in the past? _____

- As a discipler? As a disciplee?

Are you able to commit for at least six months? _____ How often can you meet? _____

Person you desire/interested in being matched with? (optional) _____

Pastoral Reference (CBC Pastor/Elder/Teacher): _____

On A Spiritual Level

How long have you been a Christian? _____ Briefly give your testimony, including how you became a Christian. _____

(If additional space is needed please feel free to staple a sheet to this form)

What are you doing on a regular basis to grow in the Lord?

In what area(s) would you like to grow in the next five years? What are you doing to accomplish this growth?

What are your areas of spiritual giftedness?

List three of your strengths:

1. _____
2. _____
3. _____

List three of your weaknesses:

1. _____
2. _____
3. _____

What three words would your family use to describe you?

1. _____
2. _____
3. _____

What three words would a friend use to describe you?

1. _____
2. _____
3. _____

On A Personal Level

What has been your life's ...

Milestones:

Trials or Traumas:

If you are married, how would you describe your relationship with your husband?

If you have children, how would you describe your relationship with your children?

On A Practical Level

What skills do you have that you could pass on to your disciple?

- Cooking Homemaking Budgeting/Finance Economical Shopping
- Hospitality Nutrition & Wellness
- Other: _____

What hobbies/recreation do you enjoy?

What do you enjoy reading?

Do you have personal experience in any of the following areas?

- Broken Home Divorce Abortion Aging Parents
- Loss of Loved One Eating Disorders Chronic Illness Singleness
- Rebellious Child Marriage Difficulties Physical or Mental Disabilities
- Abuse _____
- Addiction: Type: _____ You Child Spouse
- Other: _____

Any additional comments:
