## **SMALL GROUP LEADER INTEREST FORM**

Updated 2024

## **Personal Information**

leadership?

Your Name:		Spc	Spouse Name (if applicable):					
Primary Email: _	Primary Phone:							
Marital Status:	Never Married	Married	Divorced	Remarried	Widowed			
If married, how n	nany years?							
Church Backgı	round							
1. Are you a men	nber of Rock Point	Church?	Yes	No				
2. Have you beer are currently invo		her ministrie	es at Rock Poi	nt? Please indid	cate which ministries you			
	nresolved conflict b of church discipline				nurch, or are you currently			
			No	l would	l like to talk more about this			
Christian Grow	/th							
1. Please briefly o	describe how and v	vhen you be	came a Christ	ian:				
2. What does you	ur walk with the Loi	rd look like o	n a daily basis	s?				
	ve all struggle with ther issue in your li				particular sin, relational pause about your			

4. Have you ever received biblical counseling through our church? If so, when were you in counseling and for what issue(s)?	Yes	No
Dates in Counseling / # of Weeks:		
Issue(s) addressed in Counseling:		
Small Group Background		
1. Are you currently in a small group? Yes No		
2. Who is your current small group leader?		
3. How long have you been a part of their small group?		
4. Is your current small group leader aware and supportive of your desire t	to lead? Yes	No
5. Describe your experience with small groups (either as a leader or member churches.	per) at Rock Po	oint or previous
Small Group Leadership		
1. Why do you want to lead a small group at Rock Point?		
	//a-+ :	
2. What are you most excited about in regards to leading a small group? W	vnat is your bi	ggest concern?
3. How do you think God has gifted you to love and lead people? What are	vour leadersh	in strengths?
3. How do you think dod has gifted you to love and lead people: What are	your reductor	ip strengtris:
4. What are some of your weaknesses? What kinds of things hold you bac	k from loving	and leading
people well?	o o	Ç

## Small Group Leadership Commitment

1. Have you read and agree to abide by the	e Smal	l Group Leader R	ole Description?
	Yes	No	I would like to talk more about it
2. Our Small Group Leaders are on the from agree to provide care by coming alongside		, ,	· · · · · · · · · · · · · · · · · · ·
	Yes	No	I would like to talk more about it
3. We offer occasional training events throattend these training events to the best of			er to equip leaders. Do you agree to
`	Yes	No	I would like to talk more about it
4. Please list 2-3 references (non-family) or Point staff member or a pastor.	of those	e who know you v	well. If possible, please include a Rock
Name:		Email:	
Name:		Email:	
Name:		Email:	
My responses to the questions in this "Sma best of my knowledge.	all Grou	ıp Leader Interest	Form" are truthful and accurate to the
Signature:			Date: