



## SURVEY CARD

NAME: \_\_\_\_\_

DATE OF SALVATION: \_\_\_\_\_ YEAR OF BIRTH: \_\_\_\_\_

MARITAL STATUS (PLEASE CHECK ALL THAT MAY APPLY):

- SINGLE
- MARRIED
- SEPARATED
- DIVORCED

SPOUSE'S NAME: \_\_\_\_\_

NAMES AND AGES OF CHILDREN:

\_\_\_\_\_  
\_\_\_\_\_



## SURVEY CARD

NAME: \_\_\_\_\_

DATE OF SALVATION: \_\_\_\_\_ YEAR OF BIRTH: \_\_\_\_\_

MARITAL STATUS (PLEASE CHECK ALL THAT MAY APPLY):

- SINGLE
- MARRIED
- SEPARATED
- DIVORCED

SPOUSE'S NAME: \_\_\_\_\_

NAMES AND AGES OF CHILDREN:

\_\_\_\_\_  
\_\_\_\_\_



## SURVEY CARD

NAME: \_\_\_\_\_

DATE OF SALVATION: \_\_\_\_\_ YEAR OF BIRTH: \_\_\_\_\_

MARITAL STATUS (PLEASE CHECK ALL THAT MAY APPLY):

- SINGLE
- MARRIED
- SEPARATED
- DIVORCED

SPOUSE'S NAME: \_\_\_\_\_

NAMES AND AGES OF CHILDREN:

\_\_\_\_\_  
\_\_\_\_\_



## SURVEY CARD

NAME: \_\_\_\_\_

DATE OF SALVATION: \_\_\_\_\_ YEAR OF BIRTH: \_\_\_\_\_

MARITAL STATUS (PLEASE CHECK ALL THAT MAY APPLY):

- SINGLE
- MARRIED
- SEPARATED
- DIVORCED

SPOUSE'S NAME: \_\_\_\_\_

NAMES AND AGES OF CHILDREN:

\_\_\_\_\_  
\_\_\_\_\_

CHURCH ATTENDANCE: \_\_\_\_\_

HAVE YOU EVER TAKEN A SPIRITUAL GIFTS SURVEY?

YES  
 NO

IF SO, PLEASE LIST YOUR TOP 3 STRONGEST SPIRITUAL STRENGTHS:

\_\_\_\_\_

MINISTRY EXPERIENCE (IF ANY - WHAT, WHERE):

\_\_\_\_\_

CLUBS OR AFFILIATIONS:

\_\_\_\_\_

ADDITIONAL SKILLS, TALENTS, OTHER LANGUAGES SPOKEN:

\_\_\_\_\_

CHURCH ATTENDANCE: \_\_\_\_\_

HAVE YOU EVER TAKEN A SPIRITUAL GIFTS SURVEY?

YES  
 NO

IF SO, PLEASE LIST YOUR TOP 3 STRONGEST SPIRITUAL STRENGTHS:

\_\_\_\_\_

MINISTRY EXPERIENCE (IF ANY - WHAT, WHERE):

\_\_\_\_\_

CLUBS OR AFFILIATIONS:

\_\_\_\_\_

ADDITIONAL SKILLS, TALENTS, OTHER LANGUAGES SPOKEN:

\_\_\_\_\_

CHURCH ATTENDANCE: \_\_\_\_\_

HAVE YOU EVER TAKEN A SPIRITUAL GIFTS SURVEY?

YES  
 NO

IF SO, PLEASE LIST YOUR TOP 3 STRONGEST SPIRITUAL STRENGTHS:

\_\_\_\_\_

MINISTRY EXPERIENCE (IF ANY - WHAT, WHERE):

\_\_\_\_\_

CLUBS OR AFFILIATIONS:

\_\_\_\_\_

ADDITIONAL SKILLS, TALENTS, OTHER LANGUAGES SPOKEN:

\_\_\_\_\_

CHURCH ATTENDANCE: \_\_\_\_\_

HAVE YOU EVER TAKEN A SPIRITUAL GIFTS SURVEY?

YES  
 NO

IF SO, PLEASE LIST YOUR TOP 3 STRONGEST SPIRITUAL STRENGTHS:

\_\_\_\_\_

MINISTRY EXPERIENCE (IF ANY - WHAT, WHERE):

\_\_\_\_\_

CLUBS OR AFFILIATIONS:

\_\_\_\_\_

ADDITIONAL SKILLS, TALENTS, OTHER LANGUAGES SPOKEN:

\_\_\_\_\_