Document: Ministry Team Profile Assessment - #1090

Date Recorded:9-1-2015 08:09:03
Submitted By: Monica Houston

Q1. Please enter the following: First Name, Last Name
First Name: Monica

Last Name: Houston

Q2. Mentee Name
Input

Q3. Mentee #
Input

Q4. Did you review the SIMA Motived Abilities Pattern (MAP) if available?
- ❍ Yes
- ❍ No
- ❍ Not Available

Q5. Did you review the Giftedness Assessment Guide?
- ❍ Yes
- ❍ No
- ❍ Not Available

Q6. Include comments on how you see him/her fitting into a team:
Input

Q7. Include comments on what kinds of ministries he/she is best suited for and least suited for:
Input

Q8. Include comments on the kinds of people he/she will relate with best and relate with poorly:
Input

Q9. Include comments on the size of groups he/she is best suited for and least suited to minister to: