

**PERSONAL & MINISTRY ACCOUNTABILITY**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

1. How are you doing in the following areas?

	<b>Need help (1) - Stable (9)</b>
Your consistency in satisfying personal devotions	
Your battling against ungodly thoughts (unbelief, bitterness, resentment, lust, pride, jealousy, covetousness, racism etc.)	
Your energy for the week ahead	
Your feelings of effectiveness in your ministerial role(s)	

2. Did you take a day off this past week? YES NO

3. Have you been with a man or woman in the past week in a way that could be viewed as compromising? YES NO

4. Have any of your financial dealings failed to be filled with integrity? YES NO

5. Have you viewed sexually explicit material? YES NO

6. Have you neglected to give appropriate time to your family? YES NO

7. Would your family answer the above question the same as you? YES NO

8. Is there anything that you would like me (or the leadership team) to pray with you about or hold you accountable for or rejoice over with you? (i.e. significant stresses, temptations, or joys)

<b>Answer(s):</b>

1. How are you doing in the following areas?

	<b>Need help (1) - Stable (9)</b>
9. How is your family joy and harmony?	
10. Access your eating and exercise this past week	

11. Have I been honest with my answers? YES NO

Signature: