Generations Leader/Co-Leader & Coordinator Questionnaire

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| Date:  Name:  Address:  City:  State:      Zip:  Nation:  Phone: Home (     )       Cell (     )  Email:  Date of birth:  Male  Female | (*Name of group, lighthouse, area team, or region))*  New Generations Group Leader  New Generations Group Co-Leader  Region Generations Coordinator  Region:  Existing Generations Group:  Replacing Leader/Coordinator:    *(Name of leader)* |

1. When did you receive Jesus as your Savior?
2. When were you were baptized in the Holy Spirit with evidence of speaking in tongues?
3. I have received & agree with the Aglow and the Generations mission statements.  Yes  No
4. I have received & agree with Aglow’s vision and feel able to express this vision.  Yes  No
5. Are you aware that prayer and evangelism are the foundational pillars of Aglow?  Yes  No
6. Are you familiar with Aglow’s mandates: Male-Female Reconciliation, Islam, Israel?  Yes  No
7. Do you agree with the Aglow Belief Statement and consent to abide by the By-laws and Constitution of Aglow and set aside conflicting denominational practices?  Yes  No
8. I am an Aglow Global Partner.  Yes  No
9. Church attending:
10. How Long:       Denomination:
11. I live a moral and upright life according to Biblical Standards found in Galatians 5:16-26  Yes  No
12. If I have ever taken part in any occult activities, I have renounced such teachings and activities and have asked God to forgive me.  Yes  No
13. Are you in leadership in any other ministry?  Yes  No If yes, what ministry?
14. Are you willing to make your call to serve in Aglow a priority?  Yes  No
15. Will you commit to attend Leadership trainings as required for leaders?  Yes  No
16. Will you commit to attend Aglow events in your Area?  Yes  No
17. *GameChangers* is a foundational teaching in Aglow. Have you been involved in this personal development course?  Yes  No
18. If yes, have you completed the assignments for *GameChangers*?  Yes  No  In Process
19. If you checked “No” to either #16 or #17, are you willing to go through *GameChangers* with local Aglow leaders?  Yes  No
20. Do you commit to asking for advice and following the direction that your Area Leader and/or Regional Director gives?  Yes  No
21. Do you have someone who regularly encourages, exhorts, and/or admonishes you (Romans 15:14)?  Yes  No
22. Who is it?       What is your relationship to that person?
23. How did you hear about or become involved in Aglow International?
24. Why do you feel God is calling you to lead a Generations Group or to step into the role of Regional Generations Coordinator (for US regions)?

Your signature:

Name:       Date:        
(If filling out on-line, please type your name)

Please submit this form to your Area Team (or Regional Director for Region Coordinator position) for approval.  
(If you don’t know who that is, please contact Janae Lovern at 425-275-0231 or [janaelovern@aglow.org](mailto:janaelovern@aglow.org) )

Area Team (or Regional Director) Approval:

Signature:       Date:        
(Name and title - If filling out on-line, please type)

Send completed form to:

Aglow International

Attn: Janae Lovern  
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Edmonds, WA 98020-1749

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