

FOR FACILITATOR USE ONLY

Consultation for Central Member

Counselor's Name: _____

Date of Consultation: _____

Answers to questions about the Member: _____

Answers to questions about Member's expectations of our church: _____

Answers to questions about Member's talents, abilities, and passions for service: _____

Answers to questions about Member's needs and competing time demands: _____

Action Plan:

Selected ministry for referral: _____
(Remember to send computer match as follow-up.)

Uncertain of appropriate ministry referral. Will proceed with computer matching and schedule phone/personal follow-up in next 10 days.
Final outcome: _____

Other follow-up and referrals needed: _____

Next contact needed: _____
