

Ministry Report Form

Please complete and return this form to: (Be sure to make a copy for yourself!)

*Director of Missions
Lake County Baptist Association
12710 W. Southview Ave.
Waukegan, IL 60085*

“Using Volunteers Effectively” Training Date: _____

<u>Mission Team(s)</u>	<u>Project Dates</u>	<u>Project</u>
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EVALUATION:

Person Reporting: _____

Phone: _____

Experience: POSITIVE: Do Again
 NEGATIVE: Not again (Summarize problems)

Do they have an interest in a short-term or long-term partnership? Yes No

_____ Total # of Volunteers Involved: _____ Local _____ Mission Team

_____ # of People Prayed for/Ministered to

_____ # of Gospel Presentations

_____ # of Decisions for Christ

SUGGESTIONS: