

CPR Weekly Report Form

1. Attendance & Roll: (Please check names of members who attended)

Name:

2. Names of Guests:

3. Quality of Relationships (Please rate on 1-10 scale, 1 terrible, 10 wonderful)

Care for another 1-10 _____ Prayer together 1-10 _____

Relationships- contact/enjoying each other outside of mtg 1-10 _____

4. Apprentice identified? Y or N Who? _____

When will he/she lead the group? _____ After, tell how it went:

5. Who else in your group would you, the leader, recommend and affirm to step out and lead or apprentice a new group?

6. Service project:

What is it?

Date performed:

Tell how it went:

7. Issues, prayer needs, or concerns to be communicated to staff: