



UPPER ROOM
FELLOWSHIP MINISTRY

Spiritual Assessment Survey:

Date: ___ / ___ / ___

First Name: _____ Last Name: _____

Address: _____ City: _____

State: __ Zip Code: _____ Cell #: _____ E-mail: _____

I. If you were granted the power to turn back the time, what would be the *single* and *most important* aspect you would correct in life? Describe in details this aspect. (Use more space if necessary).

II. If you would, (hypothetically speaking), know that the *second coming* of Jesus Christ (Matt. 24:42, Mc. 13:35, Lk. 21:36) would take place in the next 72 hours what would the three (3) most *urgent changes* you would make in your personal life? List these three (3) changes in the order of importance.

1. _____
2. _____
3. _____

III. Knowing that every living member has a particular **FUNCTION in the Body of Christ (Rom. 12:4) and at least one spiritual **GIFT** (1 Cor. 12:7); please answer:**

(A) What is your *FUNCTION*? _____

(B) What is your *spiritual GIFT*? _____

IV. Knowing that it is your responsibility to get properly "*equipped*" for your divine **FUNCTION (Rom. 12:7) and to "*kindle afresh the GIFT of God*" (2 Tim. 1:6); please answer:**

(A) What concrete steps are you taking in order to get equipped for your function? _____

(B) What do you do, practically speaking, in order to kindle afresh your spiritual gift (s)? _____

V. What are the area(s) of your life where you need the most help and assistance with? (Use more space if necessary). _____

Do not hesitate to contact us for a personalized life coaching session.

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