

# LIFE GROUP FEEDBACK FORM

LEADER NAME(S):

LIFE GROUP DURATION (how long have you been meeting):

*Instructions: Review the life group essentials listed below and rate yourself and your group on a scale of 1-10 for each item.*

## GROUP HEALTH ASSESSMENT

### INVITING

*A new person would feel included in our group*

1 2 3 4 5 6 7 8 9 10

*Members consistently invite others to group*

1 2 3 4 5 6 7 8 9 10

*Our group is open to newcomers*

1 2 3 4 5 6 7 8 9 10

### LEARNING TOGETHER

*We are able to find study resources easily*

1 2 3 4 5 6 7 8 9 10

*We normally have good discussions/participation*

1 2 3 4 5 6 7 8 9 10

*Members are applying Bible to real life issues*

1 2 3 4 5 6 7 8 9 10

### TRUST

*Group is a safe place to process truth*

1 2 3 4 5 6 7 8 9 10

*People are open about needs and struggles*

1 2 3 4 5 6 7 8 9 10

### CARE

*Relationships are growing in meaningful ways*

1 2 3 4 5 6 7 8 9 10

*Group members take responsibility for each other*

1 2 3 4 5 6 7 8 9 10

### LEADERSHIP

*All group members are serving and contributing*

1 2 3 4 5 6 7 8 9 10

*We delegate leadership to others*

1 2 3 4 5 6 7 8 9 10

*In our absence others can lead group*

1 2 3 4 5 6 7 8 9 10

*As a group we regularly assess and plan*

1 2 3 4 5 6 7 8 9 10

*We pray often and consistently for group*

1 2 3 4 5 6 7 8 9 10

### GROUP HEALTH

*How would you rate your group as?*

*A Family:*

1 2 3 4 5 6 7 8 9 10

*Of Disciples:*

1 2 3 4 5 6 7 8 9 10

*On Mission:*

1 2 3 4 5 6 7 8 9 10

What is the greatest strength in your group?

What is the greatest weakness/challenge in your group?