



FCF Affiliate Evangelistic Ministry 2008 Renewal Questionnaire

Please type or print

Ministry Information

Name _____

A.K.A. or D.B.A. _____

Mailing Address _____

City/State/Zip _____

Telephone _____ Fax _____

Street Address _____

City/State/Zip _____ Website _____

E-mail _____ Employer I. D. _____

Responsible Minister Information

Name _____ Spouse _____

Home Address _____

City/State/Zip _____ Telephone _____

E-mail _____ Cell phone _____

Ministry Report

1. As you have traveled and ministered in 2007

a. What specific word did the Holy Spirit give you to minister?

b. What prevalent needs did you see in the churches where you ministered?

c. How many times did you minister? _____
How many of these were FCF churches? _____

d. How were you received and treated in the FCF churches?

Continued on reverse side

e. What trends do you see in the Body of Christ?

2. What is your greatest challenge as a minister?

3. What are you doing to improve your health?

family? _____

finances? _____

fellowship with God? _____

study time? _____

4. We want to rejoice with you concerning any major breakthrough that you experienced in 2007. Please share. _____

**Return form to:
Faith Christian Fellowship Int'l.
Attn: Credentials
PO Box 35443
Tulsa, OK 74153-0443
(918) 492-5800**