

Leadership Report Form



Name _____

Date _____ Grade(s) of Youth _____

Church or Group _____

What kind of Class or Group did you lead (check one):

- Sunday School class Discipleship Group Youth Choir
 Weekday Bible study group Campus Christian Club
 Other _____

1. How many youth were in the group? Were they all boys, all girls, or mixed group?
2. What kinds of learning methods were used (i.e., lecture, role play, "buzz" groups, etc.)?
3. (For Youth Choir) What was the sequence of activities in the rehearsal?
4. What worked best in the session?
5. What would you have done differently?

Signature _____

*Complete this form and mail to SLTN, PMB 164, 3501 Sycamore School Road #125, Forth Worth, TX 76133
Or, fax to 817-263-0875*