

**Evaluating Your Local Prayer Ministry**  
(To be completed by prayer leader quarterly)

1. Describe your Prayer Ministry. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Are you utilizing the Statement of Purpose? Yes / No

3. If so, how are you implementing it? \_\_\_\_\_

If not, what are your plans for doing so? \_\_\_\_\_

4. Do you flow with different times and seasons of prayer? (Pg. 14, Item VI.)  
Yes / No

5. Are there strategies or ideas not listed that you find helpful? (Page 15, Item V.)

\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Church \_\_\_\_\_ Region \_\_\_\_\_

Completed by Prayer Leader: \_\_\_\_\_

Reviewed by Regional Prayer Coordinator: \_\_\_\_\_

Comments: \_\_\_\_\_

(Please make copies of this original for your use)