

Ministry Evaluation Tool

Name of Ministry: _____ Date: _____

Name of Person completing this form: _____

Name of Team this ministry is connected to: _____

Name of Team Moderator this form is submitted to: _____

1. Briefly describe the ministry/ministry activity that is being evaluated:
2. What was the goal of this ministry/ministry activity?
3. Was the goal of this ministry/ministry activity met?
Yes – Explain how

No- please explain why not
4. How did this ministry fulfill the difference this church seeks to make in the life of others?
5. Was the Ministry Planning Tool was helpful to you (and your team) in planning this ministry?
If so, how?
6. Did you have sufficient help (“doers”) to reach the goal of this ministry/ministry activity?
Yes – please elaborate

No – please elaborate
7. Did you have sufficient financial resources to reach the goal of this ministry/ministry activity?
Yes – please elaborate

No – please elaborate
8. Did you receive needed guidance from the Team and session for fulfilling this ministry?
Yes – please elaborate

No – please elaborate
9. Did the Team support this ministry and your role in carrying it out?
What might have been improved in that support?