AGLOW LEADERSHIP QUESTIONNAIRE

Please type or print. All questions must be answered.

Name_____ Date_____

Local Address_____ Office chosen for_____

Mailing Address_____ _____

City_____ Country_____

Name of Local/Area/National Board/Committee:_____

Home Phone_____

E-mail_____

Occupation_____ Local_____ Area_____National_____

Languages you speak_____ National Director/Coordinator/Assistant_____

Married_____ Single_____ Widowed_____ Divorced_____Past Aglow offices held:_____

Date of Birth _____/_____/_____ _____

Day Month Year _____

Spouse's name_____ _____

Ages of Children_____ _____

Church and denomination presently attending_____

How long have you attended this church?_____

Name of Pastor/Priest_____

Previous religion or church affiliation_____

When did you accept Jesus as your Savior?_____

Describe your salvation experience_____

When were you baptized in the Holy Spirit?_____

Describe your experience_____

Do you speak in tongues on a regular basis?_____

What Christian work are you now doing?_____

What Christian work have you done in the past?_____

Are you a member or leader in any other groups?_____

If so, name_____

Do you agree with the Aglow statement of *What We Believe* and are you able to work within its principles?___

If your church believes differently or has different practices, are you willing to <u>not</u> bring these into your Aglow group?

_____

Will you be committed to attend leadership training sessions when they are scheduled?_____

(If married): Does your spouse agree with you being a leader in Aglow?_____

(Your spouse does not have to be a Christian but should agree for you to be a leader.)

Do you feel called to serve in this position? _____

As a leader, what do you feel you can offer this fellowship?_____

Do you have someone who can regularly encourage you and bring correction as needed? Romans 15:14_____

What is that person's relationship to you? (spouse, friend, pastor, etc.)_____

Will you try to work in unity with the other leaders on your board/committee?_____

Have you ever taken part in any occult activities or been a member of any cult or religion which denies the saving power of Jesus' blood or is contrary to God's Word?_____ (Deut. 18:10-14).

If so, have you renounced, denied and rejected such teachings and activities and asked God to forgive you? ___

What do you feel God has put on your heart for this fellowship? (i.e. What is your goal for this Aglow?)_____

_____

_____

Advisors: (Optional- Advisor Approval is no longer a requirement as of August 2025)

Name:_____

Name:_____

APPLICANTS SHOULD NOT WRITE BELOW THIS LINE

Please return this form to the Aglow National leader for your nation:

_____

_____

_____

or to:

Global Field Office – International
Aglow International
PO Box 1749
Edmonds, WA 98020-1749 USA

APPROVED BY:

Aglow National leader for your nation

Signature_____

Date Approved:_____

Or if there is no other leadership in the nation:

Aglow Global Field Office - International

Signature_____

Date Approved_____