

SPIRITUAL QUESTIONNAIRE

SEND TO PROJECT 1.27 AS SOON AS POSSIBLE

FIRST NAME: _____ LAST NAME: _____

WHAT IS A CHRISTIAN?

HOW DO YOU KNOW THAT YOU ARE A CHRISTIAN? OR HOW/WHEN DID CHRIST COME INTO YOUR LIFE?

HOW HAS THE LORD MADE A DIFFERENCE IN YOUR LIFE?

HOW DO YOU SEEK THE LORD IN YOUR DECISION MAKING?

WHAT DOES PRAYER LOOK LIKE FOR YOU?

DO YOU ATTEND CHURCH? IF SO, WHICH ONE, AND FOR HOW LONG?

CHURCH'S NAME: _____

ADDRESS: _____

PHONE: _____

PASTOR: (FOR SPIRITUAL INTERVIEW) _____

PASTOR'S EMAIL ADDRESS: _____

HOW HAS THE LORD CALLED YOU TO FOSTER CARE/ADOPTION? OR, WHY DO YOU WANT TO FOSTER OR ADOPT?

NOTE:

1. Contents of your spiritual questionnaire and interview with your pastor will only be shared between your pastor and appropriate Project 1.27 staff.
2. The interview questions will be given to your pastor once this form is sent in to Project 1.27.
3. Project 1.27 staff have authorization to contact your lead pastor once a child has been placed in your home.

Signature

Print Name

Date