

**AGAPE PRAYER MINISTRY SCHOOL**  
**Background and Experience Profile**

Name \_\_\_\_\_ Date \_\_\_\_\_

Y = yes N = no U = uncertain

- \_\_\_\_\_ 1) Are you born again in Jesus Christ? \_\_\_\_\_ How long? \_\_\_\_\_
- \_\_\_\_\_ 2) Are you a member in good standing in your congregation? \_\_\_\_\_ How long? \_\_\_\_\_
- \_\_\_\_\_ 3) Are you peacefully open to the full working of the Holy Spirit?
- \_\_\_\_\_ 4) Are you open to the gifts of the Spirit (e.g., 1 Cor. chapters 12 & 14) working through you as God would lead?
- \_\_\_\_\_ 5) Are you familiar with the fruit of the Spirit found in Galatians 5?
- \_\_\_\_\_ 6) Are you familiar with the full armor of God found in Ephesians 6?
- \_\_\_\_\_ 7) Do you believe you manifest faithfulness, diligence, discretion, confidentiality, and other fruit of Christian maturity?
- \_\_\_\_\_ 8) Is it your desire to be used of God in Agape prayer ministry?
- \_\_\_\_\_ 9) Do you believe that God is calling you to Agape prayer ministry in this region?
- \_\_\_\_\_ 10) Is there agreement between you and your pastor concerning your call to this ministry?
- \_\_\_\_\_ 11) Have you had Agape prayer ministry for yourself? If so, who did the ministering and when? \_\_\_\_\_
- \_\_\_\_\_ 12) Have you ever had any other deliverance and/or inner healing ministry training? \_\_\_\_\_ Describe it briefly \_\_\_\_\_
- \_\_\_\_\_ 13) Have you ever done any deliverance and/or inner healing ministry in the past? \_\_\_\_\_ If yes, explain what type and when. \_\_\_\_\_
- \_\_\_\_\_ 14) Have you read the book, *Healing for Damaged Emotions* (David Seamands)? [It is required reading before attending a school.]

Send this completed form with your Agape Prayer Ministry School registration form to: <b>The Better Place</b> , P.O. 532, Jamestown, NY 14702
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