



Georgia Association of Ministers' Wives and Ministers' Widows

**DEPARTMENT OF EDUCATION (DOE)
MEMBERSHIP RESOURCES INVENTORY TOOL**

This tool will assist the Department of Education in determining resources that are readily available in the GAMWMW organization. It also will assist in providing essential personal and medical information for each of you that is critical should emergency situations occur. Please complete the requested data below and return this form to the DOE.

PERSONAL INFORMATION

			Date
Mrs. Min. Rev. Dr.	First Name	Middle	Last Name
			Spouse's Name
Permanent Address	City and State	Zip Code	
Home Phone Number	Cell Phone Number	Email Address	
Church Name	Denomination	Location	
Pastor's Name	Local Chapter Name		

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Emergency and Medical Information: Date of Birth: _____

In case of an emergency, contact: _____ Relationship: _____

Emergency Contact No. _____ Email: _____

Are you allergic to any medications? Yes No If yes, list items you are allergic to:

List medications you are allergic to: _____

List food allergies: _____

Are you allergic to anything? Yes No If so, to what? _____

Do you wear a medical alert of any kind? Yes No Type: _____

Do you have a Pacemaker? Yes No

This tool will assist in identifying areas on which the DOE will focus when determining course curricula, workshops and areas of empowerment for the GAMWMW:

Please indicate your ministry gift(s) or area(s) of interest: (check all that apply)

<input type="checkbox"/> Prayer	<input type="checkbox"/> Creative Writing (Poetry)	<input type="checkbox"/> Playing Musical Instrument – What Instrument?
<input type="checkbox"/> Intercession	<input type="checkbox"/> Working with Youth	<input type="checkbox"/> Leadership
<input type="checkbox"/> Singing/Praise/Worship	<input type="checkbox"/> Working with Children	<input type="checkbox"/> Graphic Design
<input type="checkbox"/> Missions	<input type="checkbox"/> Administration (Organizing, adding structure, etc.)	<input type="checkbox"/> Culinary Arts; Decorating/Design
<input type="checkbox"/> Outreach/Evangelism	<input type="checkbox"/> Ministry to Women	<input type="checkbox"/> Fellowship
<input type="checkbox"/> Teaching	<input type="checkbox"/> Public Speaking	<input type="checkbox"/> Hospitality
<input type="checkbox"/> Event Planning	<input type="checkbox"/> Service Projects	<input type="checkbox"/> Parliamentary Procedures
<input type="checkbox"/> Praise Dance	<input type="checkbox"/> Developing Church Ministries	<input type="checkbox"/> Other:

SPIRITUAL GIFTS KEY:

- Helps
- Leadership
- Hospitality
- Service (Coordinating outreach efforts)
- Discernment
- Faith
- Tongues (And Interpretation)
- Miracles
- Craftsmanship (Such as floral arranging, sewing, arts/crafts, designing T-Shirts)
- Healing
- Giving
- Mercy
- Wisdom

- Knowledge
- Exhortation
- Pastor/Shepherd
- Apostleship
- Missionary
- Prophecy

OTHER PRACTICAL GIFTS/TALENTS KEY:

- Parliamentary Procedures
- Knowledge of Protocol (Program Planning)
- Travel Arrangements
- Planning Meetings
- Managing Projects
- Negotiating
- Contract Administration

Do you possess professional experience that may be beneficial to the GAMWMW? Yes No

If so, what professional experience do you have such as Information Technology, Graphic Arts, Accounting/Finance, Legal, Education, Human Resources, Medical, Clerical, Social Work, etc.?

What do you desire to accomplish by being a member of the GAMWMW? What can the organization do for you?

Complete form must be returned to the GAMWMW Department of Education, Dean Gloria Reeves, Assistant Dean Katrina Gore-Gray, Education Director Marye Ware, or Executive Assistant Marion Hargrove. Information is used for as a tool to identify resources within the membership and for those purposes only. Information is maintained in accordance with the Privacy Act and only shared to others on a Need-to-Know basis.