

Captain's Report Month _____

Updated 8/09

Captain's Name _____

Date _____

Captain

(To be completed by Care Captain and turned in to Minister)

Care Leader's Name (Print First & Last)	Phone	Interview completed 1 pt.	Photo taken 1 pt.	Phone Contacts Made Once 1pt. Twice 2 pts.	Talked to at church this month 1 pt.	Attendance %	Attendance 66% or more 2 pts. Less than 66% 1 pt.	Last Month's Attendance Verified Bonus 1pt.
1.								Y / N
2.								Y / N
3.								Y / N
4.								Y / N
5.								Y / N
6.								Y / N
7.								Y / N
8.								Y / N
9.								Y / N
10.								Y / N
11.								Y / N
12.								Y / N
Totals								

Reviewed by _____ Date _____

Side 2

Captain's Report Month _____

Updated 8/09

Captain's Name _____

Date _____

Captain

(To be completed by Care Captain and turned in to Minister)

Care Leader Name (Print First & Last)	5 Foundation Classes taken Basic Classes: 1. Christian Basics 2. Holy Spirit 3. Faith & Confession 4. Prayer & Bible Study 5. Membership & Privileges 1 pt. when all 5 classes taken	Attended Care Leader Meeting Last Month 1 pt.	Report turned in on time 1 point	Comments or Resolutions for zeros
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
Totals				Total Score

Care Leader's Report Month _____

Updated 8/09

Care Leader's Name _____ Date _____

Care Leader

(To be completed by Care Leader and turned in to Captain) Captain _____

Care Member's Name (Print First & Last)	Phone	Interview completed 1 pt.	Photo taken 1 pt.	Phone Contacts Made Once 1pt. Twice 2 pts.	Talked to at church this month 1 pt.	Attendance %	Attendance 66% or more 2 pts. Less than 66% 1 pt.	Last Month's Attendance Verified Bonus 1pt.
1.								Y / N
2.								Y / N
3.								Y / N
4.								Y / N
5.								Y / N
6.								Y / N
7.								Y / N
8.								Y / N
9.								Y / N
10.								Y / N
11.								Y / N
12.								Y / N
Totals								

Reviewed by _____ Date _____

Side 2

Care Leader's Report Month _____

Updated 8/09

Care Leader

Care Leader's Name _____ Date _____

(To be completed by Care Leader and turned in to Captain)

Care Member Name (Print First & Last)	5 Foundation Classes taken Basic Classes: <ol style="list-style-type: none"> 1. Christian Basics 2. Holy Spirit 3. Faith & Confession 4. Prayer & Bible Study 5. Membership & Privileges 1 pt. when all 5 classes taken	Attended Care Member Connection Meeting Last Month 1 pt.	Baptized in Water 1 pt.	Works in Ministry 1 pt.	Baptized in the Holy Spirit with the evidence of tongues 1 pt.	Comments or Resolutions RC= Referral for Counseling NW#= Non Working Number CC= Card or Check in issues SP= Sent Post Card HV= Home Visit (3 months 0)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
Totals						Total Score

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