

January 2009

Dear Christ Fellowship Member,

Thank you for your time and consideration in completing and returning the required forms of Packet #1. We have prayerfully examined the contents of the information we have received. With the guidance and wisdom of the Lord and upon careful reflection in reviewing, assessing, and selecting the prospective budget coaches, we have concluded and affirmed your qualification to continue to the next level of the screening process. *Included in this packet are Recommendation Forms for you to give to 2 or 3 people that you believe would help us in considering your application to serve as a Christ Fellowship Budget Coach.*

An appointment will be scheduled for your interview, pending final approval of the contents in this packet.

The contents of Packet #2 to be returned within a week of receipt:

Authorization for Criminal Record Check: this is utilized to obtain information regarding arrests, convictions, and reports of any criminal behavior.

Counseling Agreement: this serves to inform and obtain agreement to abide by the principles and guidelines delineated by the Christ Fellowship Life Development Ministry.

May God continue to bless you on your journey of personal and spiritual discovery and its rewards for your ministry within the Body of Christ.

Because of Him,

Mona Egea, MS
Stewardship Ministry



BUDGET COACHING

Stewardship Ministry

TO BE COMPLETED BY THE RECOMMENDER

To the Recommender: in considering applicants to the Lay Budget Coaching Training Program, particular emphasis is placed on the comments from people with whom the applicant is personally acquainted. We appreciate the difficulty of furnishing meaningful and candid appraisals, and we are very grateful for your contribution to our selection process. We typically find that a recommendation, which presents a balanced view of an applicant's abilities and other attributes, is most helpful to the applicant and to the ministry. This form is intended to help you present information about the applicant. Please supplement it in whatever way you feel is appropriate.

Applicant's Name _____

Recommender's Name _____

Position or Title _____ Phone () _____

Organization _____

Address _____

How long have you known the applicant? _____

In what relationship? _____

Please list the areas of applicant's greatest strength and his/her potential to contribute to the field of coaching.

Please list any areas of weakness, which you believe could preclude the applicant from successfully completing the Budget Coach Training.




Do you think participation in budget coaching is appropriate for the applicant at this time?

RATINGS OF ABILITIES ANDKNOWLEDGE


Use the following ratings scale to indicate your assessment of the applicant’s abilities, skills and knowledge.

- 9.10 Exceptional abilities and/or potential
- 7.8 Very high abilities and/or potential
- 4.6 Moderate to average abilities and/or potential
- 2.3 Below average abilities and/or potential
- 0.1 Very poor abilities and/or potential
- NA Not aware of abilities in described area

- _____ 1. Integrity – honesty, moral character
- _____ 2. Leadership – competence, self-confidence
- _____ 3. Empathy – sensitivity to the needs of others
- _____ 4. Interpersonal Relationships – cooperation, attitudes toward supervision, rapport
- _____ 5. Spiritual Commitment – genuineness and depth of commitment
- _____ 6. Work habits – perseverance, resourcefulness, initiative
- _____ 7. Reliability and dependability
- _____ 8. Ability to work with others
- _____ 9. Written communication
- _____ 10. Oral communication skills, both in-group and with individuals
- _____ 11. Ability to maintain confidentiality
- _____ 12. Overall potential as a lay counselor

-  I strongly recommend that this person be selected for the Budget Coach Training
-  I recommend that this person be selected for the Budget Coach Training
-  I recommend with some reservation that this person be selected for the Budget Coach Training.

My reservations are:

-  I do not recommend that this person be selected for the Budget Coach Training

Signature _____ Date _____

Please sign and return to:
Mrs. Mona Egea
Stewardship Ministry
Christ Fellowship Church
5343 Northlake Boulevard
Palm Beach Gardens, FL 33418
561-799-7610

Background Information Form

In connection with my application for consideration to serve as a Budget Coach, I understand that investigative background inquiries are to be made on myself. This will include Federal or State criminal arrests, convictions, and reports of any criminal behavior. I authorize without reservations, any party or agency contracted by Christ Fellowship to furnish the above-mentioned information.

Print Name _____ Sex _____ Race _____

Soc. Sec # _____ Date of Birth _____

Drivers License # _____ State _____

Current Address _____

City/State/Zip _____

Home Phone # _____ Work # _____ Cell # _____

Applicant's Signature _____ Date _____

Please complete, sign and return to:
 Mrs. Mona Egea
 Stewardship Ministry
 Christ Fellowship Church
 5343 Northlake Boulevard
 Palm Beach Gardens, FL 33418
 561-799-7610

Christ Fellowship Stewardship Ministry

BUDGET COACHING AGREEMENT

All budget coaching done by anyone associated with Christ Fellowship shall be spiritually and Biblically based. As a religious coach for the church, I hereby agree to abide by the following rules:

1. I will be selective as to whom I begin coaching.
2. I will use and state Biblical principles wherever possible in my coaching sessions.
3. I will not hold myself out as a professional financial planner, estate planner or legal consultant.
4. I will not imply that I have qualifications, which I do not have.
5. I will not use or imply the use of state regulated professional titles such as
2 “professional financial planner,” “para-legal,” or “estate planner,” unless I am licensed to do so.
6. I will take necessary precautions to **insure the confidentiality** of the coaching session.
7. I will keep notes of all coaching sessions, including the problem presented and the spiritual advice given. For purposes of confidentiality, I will keep these records separate and secure.
8. I will coach a child only upon receiving informed consent and written release from a parent or legal guardian. Coaching will be in the presence of one of the parents or legal guardian.
9. Whenever possible, I will coach members of the opposite sex only when accompanied by a staff member of the opposite sex, or a third person of the coach recipient’s choosing (spouse, friend, etc.).
10. I will not have **any personal relationship** outside of the coaching context with a person I am coaching.
11. I will not coerce anyone into beginning or continuing coaching sessions.

12. If I find that a coached person has a serious problem requiring professional assistance, I will immediately consult with my coaching supervisor and refer the person to a professional with specialized training.
13. I will not coach a given person for more than 6 sessions or three months, whichever comes first.
14. I will avoid strictly professional analysis and interventions.
15. I will emphasize the Biblical and spiritual dimensions of the religious coaching in any verbal or written descriptions of my coaching services.
16. I will begin every new coaching process by explaining that I am not a professional and that I am a Christian coach whose guidance will be scripturally based.
17. I will always refer to the Bible as the source of my coaching.
18. I will have a Bible present and be ready to utilize appropriate scripture during my coaching sessions.
19. I will pray at least once prior to or during every coaching session asking God to give me wisdom during the coaching session and to be totally dependent on Him and His Word.
20. I will pray aloud with and for the coaching recipient at least once during each coaching session as the Lord leads me.
21. I will never coach contrary to the Bible regardless of the circumstances or people involved.
22. When in doubt about recommendations to make or coaching to give, including Biblical applications to life situations, I will seek guidance with my supervisor before offering suggestions to the coaching recipient.

Please keep the Budget Coaching Agreement for your reference. Please detach this signed document and return it to:

Mrs. Mona Egea
Stewardship Ministry
Christ Fellowship Church
5343 Northlake Boulevard
Palm Beach Gardens, FL 33418

As a Budget Coach at Christ Fellowship Church, I hereby agree to adhere to the Budget Coaching Agreement.

Signature

Date

I have read, understood, and agreed with the Statement of Faith offered by Christ Fellowship Church included in the previous information packet.

Signature

Date

MMPI-2 Administration and Group Interview Dates

Name _____

Date _____

Please indicate your choice for the group interview (childcare provided)

Wednesday, TBD, 2007 at 6:45 pm* _____

Wednesday, TBD, 2007 at 6:45 pm* _____

***To take place at the Gardens South Campus**

Please indicate your choice for the administration of the MMPI-2
(Approx. 120 minutes to complete / childcare provided)

_____ Wednesday, TBD at 6:45 pm - Gardens North Campus Conference Rm.

_____ Sunday, TBD at 9:00 am - Royal Palm Beach Campus Classroom 2

_____ Sunday, TBD at 9:00 am - Gardens South Campus Outreach Center