CONCORDIA UNIVERSITY TEXAS

OBSERVATION FORM

Name___________________________________________ Date of Report________________________

Church_______________________________ Type of Activity___________________________________

General Description of Activity: (Who, what, location, time, # involved, etc.)

Leadership Dynamic: (Observations of the leadership, teaching styles of the facilitator)

Group Dynamics: (Observation of participant involvement, group cohesion, & participant interaction)

Spiritual Dynamics: (How was Law or Gospel present? How were people fed spiritually?)

Summary of Learnings: (What would you do the same/different? What key learnings/insights about ministry did you gain from observing this event? Use back of form if necessary)

Signature of activity leader:______________________________________________________________