## Program for Theological Education by Extension

## MINISTRY ACTION LEARNING PLANNING & SELF-EVALUATION

St	udent Name:	Telephone:		
Address:		Email:		
Fa	cilitator Name:	Telephone:		
Address:		Email:		
Cι	urrent PTEE Course:			
Course Start Date:		Course Examination Date:		
Tutor Name:		Telephone:		
Ασ	ddress:	Email:		
PI	LANNED MINISTRY (Please read the PTEE Academic Manual, pp.	56-58, for more information.)		
1.	State your Ministry Action Learning focus:			
2.	. State your Ministry Action Learning context:			
3.	. Name any learning colleagues you will be working with:			
4.	Summarize the ministry task you will be involved in each week and the expected duration of the ministry (in weeks) (e.g. Lead weekly youth group meeting [for 12-16 year olds] for 2 hours/week over a period of 12 weeks):			
5.	Estimate the total number of hours required for your ministry (usually over a 12 week period):  Planning: Weekly preparation: Actual ministry time:  Meeting with facilitator: Evaluation/reflection Total:  (You should be aiming for a total of 35-40 hours; most of this will be in preparation and actual ministry.)			
6.	Signature of Facilitator (indicating approval of the above plan):			
M	INISTRY EVALUATION (After completing the ministry activity.)			
7.	On page 3 list the main activities you did each week, commenting on how well it went. Make a summary here of the different aspects of the ministry task that you did yourself:			
8.	(a) Overall, how do you believe the ministry wer did it? Was it successful, or not?	nt, in terms of what <u>you</u> did, and how well <u>you</u>		

(b) What impact do you think your ministry had on those you were ministering to?

9. In your Ministry Action Learning focus, list the ways in which you gained or developed skills:				
10. How many hours, in total, did you spend in preparation, ministry, meeting with a mentor, and reflection upon that ministry?  Were the responsibilities you were asked to do:  Too demanding / Reasonable / Too light ? [Circle one]  Comment:				
INVOLVEMENT WITH FACILITATOR				
11. How many times did you meet with your facilitator to discuss your ministry?				
12. Did you find your facilitator: - Accessible and available to talk? Comment:				
- Helpful, a valuable resource? Comment:				
- Encouraging? Comment:				
13. List the things that you learnt from your facilitator:				
REFLECTION				
<ul><li>14. During the ministry experience, list what you learned:</li><li>about yourself?</li></ul>				
- about the actual ministry?				
- about God?				
15. (a) What personal strengths did you identify in the course of the ministry?				
(b) What did you identify as needed growth areas for the future?				
(c) What are you planning to do to ensure ongoing growth in these areas?				
16. Comment on the overall value of this Ministry Action Learning experience for you:				

## $\underline{\textbf{JOURNAL \& SELF-EVALUATION}} \ \, (\text{To be completed each week; see question 7 on page 1.})$

Week	Date(s)	Main Tasks/Activities Performed	Evaluation of Tasks/Activities
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Other comments: