



Ministry Foundation Survey

The following is a resource to help new or existing orphan care ministries identify the foundations for their work in the areas of leadership, vision and mission, assets and needs as well as a basic church profile. Provide as much information as is available and email this form to bruce@embracetexas.org if you'd like Embrace to assist you in developing your ministry.

CHURCH PROFILE

Contact: _____ Email: _____ Phone: _____

Church Name: _____ Website: _____

Physical Address: _____ County: _____

of full-time staff: _____ # of disciplined members _____ # in weekly attendance _____

Year Established: _____ Percentage of \$ Dedicated to Missions from Annual Budget: _____ %

Generational & Racial Makeup (by approx. percentage):

0-5 years old _____ % 6-12 years old _____ % 13-18 years old _____ %

18-25 years old _____ % 26-35 years old _____ % 36-50 years old _____ %

51-65 years old _____ % 66+ years old _____ %

White _____ % Hispanic/Latino _____ % African American _____ % Other _____ %

Denominational Affiliation(s) (if any): _____

List any missional, service or care ministries or organizations your church currently leads or supports:

Describe your church's discipleship structure (i.e. where and when do small groups meet, how are they divided (by age, location, special interest), who leads them (lay leaders vs. staff), how do they select outreach opportunities (i.e. staff appointed, group specific, etc.):

Do you have an existing or previously existing orphan care ministry? YES NO If YES, tell us about it, and if NO, tell us about how you got to the point of wanting to start one:

LEADERSHIP

Tell us about your leaders and existing or envisioned leadership structure. Leaders may be listed as couples or individuals. Experience should include foster/adoptive parenting, education/gifting, leadership expertise (*i.e. what have they led before?*), and capacity (*i.e. what are they already committed to or how much time/money are they willing to devote?*).

Leader 1: _____ Parenting: _____

Education/Gifting: _____

Leadership Expertise: _____ Capacity: _____

Leader 2: _____ Parenting: _____

Education/Gifting: _____

Leadership Expertise: _____ Capacity: _____

Leader 3: _____ Parenting: _____

Education/Gifting: _____

Leadership Expertise: _____ Capacity: _____

Leader 4: _____ Parenting: _____

Education/Gifting: _____

Leadership Expertise: _____ Capacity: _____

(If your ministry has other leaders, please continue to list their information on the back.)

Staff Liaison: _____ Position: _____

What is the staff member's role in the ministry? _____

Leadership Structure

Provide a diagram for your current or potential leadership structure in the space below.
Include roles and responsibilities as applicable.

VISION AND MISSION

We will define *Vision* as the overarching goal of your ministry (*i.e. what do you hope to ultimately accomplish?*) and *Mission* as the practical work of your ministry (*i.e. how will you accomplish your Vision?*). The following questions are meant to assist you in developing your Vision and Mission.

What is the scope of your ministry's efforts? Local Regional State National Global

Please circle all that apply. Local efforts include a specific neighborhood, community or city your church serves. Regional includes a specific county or group of counties identified by your State's child welfare department.

List the location(s) of your focus areas: _____

In order of priority, include the specific names of neighborhoods, cities, counties, states, nations, or international cities, regions and countries your ministry would like to focus on. Be as specific or general as is appropriate.

Child Welfare Populations (circle all that apply):

These are populations of children or adults you primarily want to focus on serving.

AT-RISK CHILDREN CHILDREN IN FOSTER CARE ADOPTABLE CHILDREN

INT'L REFUGEES OLDER CHILDREN (6+ YRS.) TRANSITIONING YOUTH (16-21 YRS.)

FOSTER YOUTH W/ CHILDREN FOSTER/ ADOPT PARENTS KINSHIP/ BIO FAMILIES

PRIMARY MEDICAL NEEDS CHILDREN INT'L ORPHANS OTHER: _____

Channels of Ministry (circle all that apply):

These are program areas your ministry may have specific interest in.

RECRUITMENT / AWARENESS FAMILY SUPPORT CHILD MENTORING

FAMILY EDUCATION TRANSITIONAL SERVICES ADVOCACY / CASA

HEALTH CARE FAMILY PRESERVATION ORPHANAGE(S)

CHILD SPONSORSHIP FINANCIAL ASSISTANCE CHILD TRAFFICKING

Vision: _____

Mission: _____

Example: Embrace's vision is the Church reclaiming the care of orphans and waiting children. Embrace's mission is to provide a continuum of care for at-risk, foster and adopted children and families in Collin County in order to develop effective initiatives that can be replicated to church-based orphan care ministries across the United States.

ASSETS AND NEEDS

The following is a space to highlight and brainstorm the strengths of your church, community or network of your leadership as well as the needs, or gaps in service, for the population(s) you are attempting to minister to. Think outside the box.

What is your church known for? _____

What foster/orphan care related organizations or agencies is your leadership already connected to?

What other churches in your area are serving at-risk, neglected or abused children? _____

List any local businesses or community groups in your area with private meeting space or a vested interest in at-risk, neglected or abused children that you know of:

What additional assets does your group already have? (circle all that apply)

- TEACHERS/SCHOOL ADMIN. COUNSELORS/THERAPISTS SOCIAL WORKERS
- BUS MINISTRY HEALTH CARE PROFESSIONALS JUDGES/LAWYERS DONORS/FUNDS
- STORAGE/OFFICE/MEETING SPACE SOCIAL NETWORKING A/V EXPERTISE
- CAMPS/RETREATS GOVERNMENT OFFICIALS TEMP. HOUSING CLOTHING/FOOD PANTRY
- OTHER: _____

Identify the Homeless/Foster Care liaisons for your school district(s) and the district they represent:

of Children per district qualifying for McKinney-Vento services (ask the liaison): _____

Church Family Statistics (if known): Foster/Adopt Couples _____ Foster/Adopt Singles _____

Kinship Families _____ Biological Families _____

County Statistics (if known): Children in Foster Care _____ Poverty Rate _____

The Embrace Staff will use the provided information to assist your ministry development if desired. After submission, we will confirm we received your survey. Please give us up to 2 weeks to research your community and follow up with you to begin a dialogue around the vision God has placed in your heart for these children and families.