## **Life Group Leader Check-In**

Fill out and return to Adam or Alli

| Leader Name(s):  |
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| When does your group currently meet? (day/time)  |
| How many are currently in your group?  |
| What did your group study this past fall? How did it go?   |
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| What is your group planning on studying this upcoming Winter/Spring?   |
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| What is one thing going well in your group right now?  |
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| What is a growth opportunity in your group right now?  |
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| What would you like to be trained and equipped in during future Leader Trainings?  |