

Spiritual Guardian Monthly Report

You have been chosen to the sacred duty of Guardian for the listed new member below. Show love and interest in them and let them know that your sympathy is with them in their struggles to overcome sin and the discouragements that always come to a new believer. If you see a problem developing (discouragement, disinterest, absence from church services, confusion, etc.), please contact the Spiritual Guardian Coordinator of pastor immediately.

New Member Name: _____

Spiritual Guardian Name: _____ **Date:** _____

Place a check for each week when you have observed the following:

Sabbaths for the month of _____		1	2	3	4	5
1.	Sabbath School Attendance					
2.	Church Service Attendance					
3.	Prayer Meeting Attendance					
4.	Church Activities, etc. (attendance and participation)					

Receiving *Review & Herald* Monthly edition Yes _____ No

Receiving *Union Paper* Yes _____ No

Following plan of daily Bible study and family worship Yes _____ No

Reading *Spirit of Prophecy* books Yes _____ No

General spiritual condition (circle one) A B C

Comments on visits and phone calls (please note any particular problems of this new member): Use the back of this sheet for this information.

Please mail monthly report to:
