

New Life Tracker

1. Name of convert _____ Address: _____ Telephone: _____

2. Date of commitment to Christ _____

3. Circumstances: (check where the conversion took place)

- | | |
|---|--|
| <input type="checkbox"/> Worship service | <input type="checkbox"/> Doubling Gap Center |
| <input type="checkbox"/> Evangelistic service | <input type="checkbox"/> One-on-one sharing |
| <input type="checkbox"/> Sunday school | <input type="checkbox"/> Vacation Bible School |
| <input type="checkbox"/> Home group | <input type="checkbox"/> Other (Explain briefly _____) |

4. Mentor assigned to this convert _____

5. Spiritual Journey: (Enter date each is begun or completed, as applicable)

- Has assurance of salvation
- Knows how to deal with sin in his/her life
- Has been baptized
- Participates regularly in the Lord's Supper and feetwashing
- Reads the Scriptures and prays at least 5 days/week
- Regularly attends a small group meeting
- Worships with church family regularly
- Knows how to be filled with the Holy Spirit
- Shows evidence of fruit of the Spirit
- Has joined the church
- Steward of time, talents, and treasures
- Has shared the gospel with a non-Christian
- Has shared 3-minute personal faith story with a non-Christian (What life was like before Christ, how met Christ, the difference Christ has made)
- Has led another person to faith in Christ
- Has read the New Testament
- Has read the Old Testament
- Ministers to others based on passion, temperament, and spiritual gifts
- Mentors someone else

