

## Feedback form

Please tell us about your experience of *Gospel Shaped Living*.  
(Please write on the back as well if you need more space.)



1. Which of the following did you take part in or use?

- Main teaching sessions
- Devotionals
- Group Bible study
- Personal journal
- Sermon notes

2. How encouraging did you find Gospel Shaped Living?   
(1 = not at all; 5 = very)

What in particular encouraged you?

3. How challenging did you find Gospel Shaped Living?   
(1 = not at all; 5 = very)

What in particular challenged you?

4. How well did the material suit you and your group? (eg: the type and level of question, length of discussion time, opportunities to share with others)   
(1 = not at all; 5 = very)

Please give details.

5. What was the highlight of the course for you?

6. What could we do better next time?

7. What next step will you take personally as a result of this curriculum?

8. What one thing would you like the church to change as a result of this curriculum?

9. Would you like further training in the area of Gospel Shaped Living? If so, what training would you find most helpful?

10. If we run another course from the Gospel Shaped Church curriculum, how likely are you to take part?