

## FAITHFULNESS REQUIREMENTS 2025:

Your Name: \_\_\_\_\_

Accountability Partner: \_\_\_\_\_

Date of the Wednesday this sheet is due: \_\_\_\_\_

*I attended Church on: (place a check by all that apply)*

<input type="checkbox"/>	Sunday AM
<input type="checkbox"/>	Sunday PM
<input type="checkbox"/>	Wednesday Night
<input type="checkbox"/>	All of the Above

*Did you spend personal time with God at least 5 out of 7 days last week? (place a check by all that apply)*

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

*Scripture Memory (verses must be said to youth staff)*

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

*Did you pray with your parents at least 5 times this week?*

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

*List some things that you prayed for:*

*Sermon Notes: list the passage from one message and one thing that God taught you:*

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*Sermon Notes: list the passage from one message and one thing that God taught you:*

*Devotional Time:*

*Monday – list the passage; what did you learn?*

*Tuesday – list the passage; what did you learn?*

*Wednesday – list the passage; what did you learn?*

*Thursday – list the passage; what did you learn?*

*Friday – list the passage; what did you learn?*

*Saturday – list the passage; what did you learn?*

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