

# LIFE ENRICHMENT APPLICATION

# LifeEnrichment Application

Confidential Personal Inventory  
Contact Information

Name		
Street Address		
City ST ZIP Code		
Home Phone / Work phone		
E-mail Address		
Current Profession		Age _____

Please Answer the following briefly:

1 What is your church background?

2 Explain briefly your conversion experience. If you came to Christ as a teenager or older, was your life r

3 Were you baptized as a child?                      Were you baptized as a convert?

4 In one word, who is Jesus Christ to you?

5 What does the blood of Calvary mean to you?

6 Is repentance part of your Christian life?

7 What is your prayer life like?

8 Do you have a problem with doubt and unbelief in everyday Christian living?

9 Are you satisfied with your Christian walk? Yes or No    If not, how would you like to see it improve:

Category A - Please Answer the following briefly:

1 Was your relationship with your parents: good    bad    indifferent

Explain:

a. Any special problems with your father?

b. Any special problems with your mother?

c. With your brother(s) or sister(s)?

- 2 a. Were you a planned child? Yes No  
b. The "right sex?" Yes No  
c. Were you conceived out of wedlock? Yes No  
d. Were you adopted? Yes No  
e. If adopted, do you know anything about your natural parents?

f. Do you know if your mother suffered any trauma during her pregnancy with you?

g. Did you have a difficult or complicated birth?

- h. Were you bonded at birth? Yes No  
i. A breast-fed baby? Yes No  
j. Do you have brothers and sisters? Yes No
- |            |           |
|------------|-----------|
| Name _____ | Age _____ |
| Name _____ | Age _____ |
| Name _____ | Age _____ |
| Name _____ | Age _____ |

Where do you fall in the sibling line?

How was your relationship with them growing up?

What is it like now?

Any special problems?

- 3 Are your parents living? Father yes no  
Mother yes no
- Are they Christians? Father yes no  
Mother yes no
- Living together? yes no
- Divorced? yes no
- How old were you when they divorced? \_\_\_\_\_
- Remarried? Father yes no

Mother                      yes                      no

How is your relationship with stepparents?

Are they Christians?

Step-brothers?

Step-sisters?

How was your relationship growing up?

How is your relationship now?

4 Are you a critical person?            Yes \_\_\_\_\_ No \_\_\_\_\_ Maybe \_\_\_\_\_

5 Do you feel emotionally immature? Yes \_\_\_\_\_ No \_\_\_\_\_ Not necessarily \_\_\_\_\_

6 Tell us about your self-image (circle where applicable)

Low self-image

Feel insecure

Condemn Myself

Hate myself

Feel worthless

Believe I am a failure

Question my identity

Punish myself (If so, how?)

7 Was your father (circle):    passive            strong and manipulative            neither

Were you friends?    Yes    No            Sort of

Describe briefly your relationship with your father:

8 Was your mother (circle):    passive            strong and manipulative            neither

Were you friends?    Yes    No            Sort of

Describe briefly your relationship with your mother:

9 Was yours a happy childhood? \_\_\_\_\_ Describe briefly.

10 How would you describe your family's financial situation when you were a child? (circle)

Poor

Slight financial struggles

Moderate Income

Affluent

11 Has lying or stealing been a problem to you?    Yes    No

Is it now?    Yes    No

12 Were you lonely as a teenager? Yes Sometimes Never  
Explain:

13 As a child, teenager, or later in life, did you ever suffer an injustice?  
What?

By whom?

14 Do you have trouble giving or receiving love? No \_\_\_\_\_ At times \_\_\_\_\_ Yes \_\_\_\_\_

15 Do you find it easy to communicate with persons close to you? (Circle answer)

I have real difficulty I am unwilling  
I have some problems at times It's easy

16 Are you a perfectionist? Yes \_\_\_\_\_ No \_\_\_\_\_

Were (are) your parents perfectionists? Yes \_\_\_\_\_ No \_\_\_\_\_

17 Do you come from a proud family? Yes \_\_\_\_\_ No \_\_\_\_\_

18 Do you personally have a problem with pride? Yes \_\_\_\_\_ No \_\_\_\_\_

19 Do you have or have you had problems with (circle all applicable:)

Impatience Irritability Temper Racial prejudice  
Moodiness Rebellion Violence  
Stubbornness Anger Temptation to Murder

20 Have you been given to:

Swearing Blasphemies Obscenities

Do you now:

Swear Blaspheme Use obscenities

21 Do you have toward anyone:

Unforgiveness \_\_\_\_\_ Whom and why:

Resentment \_\_\_\_\_ Whom and why:

Bitterness \_\_\_\_\_ Whom and why:

Hatred \_\_\_\_\_ Whom and why:

### Category B

1 Are you easily frustrated? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you show it or bury it? Show \_\_\_\_\_ Bury \_\_\_\_\_

2 Are you: an anxious person a worrier get depressed

3 Did either of your parents suffer from depression?

No Father Mother

4 Has any parent, brother or sister, grandparent suffered from an acute nervousness or mental problem?

Yes \_\_\_\_\_ No \_\_\_\_\_

Whom? \_\_\_\_\_ Problem? \_\_\_\_\_

5 Have you personally ever had psychiatric counseling? Yes \_\_\_\_\_ No \_\_\_\_\_

Hospitalization? Yes No

Shock Treatment? Yes No

Psychoanalysis? Yes No

Other?

6 Have you ever been hypnotized? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when and why?

7 Have you had advanced education? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what?

8 Have you, your parents, or grandparents been in any cults: (circle where applicable)

Christian Science Rosicrucian Jehovah's Witnesses

Gurus Mormons Unity

Spiritist Churches Children of Love Christadelphians

Scientology Bahai Religious Communes

Theosophy Native religions Unification (Moonies)

Eastern religions such as Hinduism, Buddhism (Zen, Tibetan), Islam, etc.

Other:

9 To your knowledge, has any close family member been a:

Free Mason	Oddfellow	Rainbow Girl	Mormon
Eastern Star	Shriner	Elk	Demolay
Job's Daughters	Daughter of the Nile		

If so, whom?

Do you suffer from (circle where applicable):

Apathy	hardness of emotions	confusion	skepticism
Doubt	financial disaster	unbelief	allergies
Infirmities	frequent sickness	mockery	comprehension difficulty

Is there any Masonic regalia or memorabilia in your possession? Yes No

If so, what?

- |                                                  |     |    |
|--------------------------------------------------|-----|----|
| 10 Do you feel mentally confused?                | Yes | No |
| Have mental blocks?                              | Yes | No |
| 11 Do you day-dream?                             | Yes | No |
| Have mental fantasies?                           | Yes | No |
| 12 Do you suffer from frequent bad dreams?       | Yes | No |
| Sleeplessness?                                   | Yes | No |
| 13 Have you ever been tempted to commit suicide? | Yes | No |
| If yes, when and why?                            |     |    |

- |                                 |     |    |
|---------------------------------|-----|----|
| 14 Have you ever wished to die? | Yes | No |
| Spoken it aloud?                | Yes | No |

15 Have you had a strong and prolonged fear to any of the following?

Failure	inability to cope	inadequacy	death
Authority figures	The dark	violence	rape
Being alone	Satan & Evil Spirits	the future	women
Grocery Stores	Heights	Insanity	men
Public Speaking	People's Opinions	Accidents	Old Age
Enclosed places	terminal illness	Breakup	Insects
Divorce or Marriage	Spiders	Dogs	Snakes
Animals	Loud Noises	Water	Pain
Flying in an Airplane	Open Spaces	Crowds	Death or injury of a loved one

- Since becoming a Christian, do any of the above fears still grip you? Yes No  
If so, which ones?

### Category C

- 1 Have you ever made a pact with the devil? Yes No  
Was it a blood pact? Yes No  
What was it?

When?

Why?

- Are you willing to renounce it? Yes No

- 2 To your knowledge, has any cursed been placed on you or your family?  
By Whom?

Explain:

- 3 To your knowledge, have your parents or any relative as far back as you know been involved in occultis  
Yes No  
Whom and doing what?

To what extent?

- 4 Have you ever had involvement with any of the following?  
Fortune tellers tarot cards Ouija boards  
Seances Mediums Palmistry  
Astrology Color Therapy Levitation  
Astral Travel Horoscope Lucky Charms  
Black Magic Demon Worship Asked for a spirit guide  
Clairvoyance Crystals Done Automatic Handwritir  
New Age movement Been to a curandero or native healer  
Been involved in any other witchcraft, demonic or Satanic things?  
If so, what?

- 5 Have you ever read books on occultism or witchcraft? Yes No  
Why?

- 6 Have you played demonic games such as Dungeons & Dragons? Yes No  
Watched demonic films? Yes No  
Do you now? Yes No

- 7 Have you been involved in transcendental meditation? Yes No

Do you have a mantra? If so, what is it?	Yes	No	
8 Have you been involve in Eastern religions? Followed a guru?		yes yes	no no
9 Have you ever visited heathern temples? Made offerings? What were they?		yes yes	no no
Did you take part in any ceremony? Explain:		yes	no
10 Have you ever done any form of yoga? Meditation? Exercises?		yes yes yes	no no no
11 Have you ever learned or used any form of mind communication or mind control? Explain:			
12 Were your parents or grandparents superstitious? Were or are you?		yes yes	no no
13 Have you ever worn lucky charms, fetishes, amulets or signs of the zodiac? Do you have any in your possession?		yes	no
14 Do you have in your home any symbols of idols or spirit worship, such as: Buddhas Idol Carvings Tikis Where are they from, and how did you get them?	Totem poles Fetish objects or feather Native art - what kind	Painted face masks Pagan symbols Kachina dolls	
15 Do you have any witches, such as "good luck kitchen witches" in your home?			
16 Are you "turned on" by any of the following music: rock & roll rap	punk rock heavy metal	new age	
17 Have you ever learned any of the martial arts? If so, which?  Do you practice it now?		yes yes	no no no
18 Have you ever had premonitions? Déjà vu? Psychic Sight?		yes yes yes	no no no
19 Have you ever been involved in: firewalking voodoo any form of religious pagan ceremony		yes yes yes	no no no



Committed incest? yes      no

Have you ever been raped?  
By whom? yes      no

Explain:

7 Have you ever committed fornication (single persons)? yes      no

How many partners?

First names and when:

With prostitutes?	yes	no	How many?	When?
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Others?

Have you ever committed adultery (at least one partner married)? yes      no

First names and when:

Are you currently involved in an illicit sexual relationship? yes      no

Name:

Are you willing to break it off? yes      no

8 Have you every had a homosexual or lesbian desire? yes      no

Do you now? yes      no

Experience? yes      no

Whom and when?

9 (MARRIED WOMEN ONLY) Are you sexually frigid? yes      no

10 Have you ever sexually fantasized about an animal? yes      no

Committed a sex act (bestiality) with an animal? yes      no

Name all animals involved:

11 Has pornography ever attracted you? yes      no

How did you become involved?

Name persons involved:

To what extent?

Is it still a problem? yes      no

Have you seen porn movies? yes      no

Videos? yes      no

Live sex shows? yes      no

Do you currently purchase or rent porn, or have such a channel on your TV?



**Category F**

1 What is your country of birth?

2 Have you lived in other countries?                      yes                      no                      Which ones?

3 Where was your mother born (city, state, nation)?

Your father (city, state, nation)?

4 Where were your grandparents born (city, state, nation)?

Mother's mother?

Mother's father?

Father's mother?

Father's father?

**Category G**

1 Do you suffer from any chronic illness or allergies?                      yes                      no

Which?

Is it hereditary?

2 Have you had any severe accidents or traumas that stand out in your mind (not already mentioned above)?  
Explain:

3 Describe yourself in as many one- or two-word phrases as you can:

- |    |    |
|----|----|
| a. | h. |
| b. | i. |
| c. | j. |
| d. | k. |
| e. | l. |
| f. | m. |
| g. | n. |

4 Do you have any other problems you feel this questionnaire hasn't uncovered? (Explain as fully as you can. Try to pinpoint when the problem began and if it was connected with a trauma of some sort, if you were

victimized or if you invited the problem in.)

## LIFE ENRICHMENT

We do not have a specific charge for services rendered in the Life Enrichment program but we believe that giving you an opportunity to sow financially into this ministry will bring you a personal satisfaction and blessing. We understand that people vary in their ability to donate, therefore we ask you to prayerfully consider what you should give.



**Faithful Is He, Inc.**

*Faithful is he that calleth you, who will also do it.  
1 Thessalonians 5:24*

*Ann & Loyd Cope*

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