

- Please use a BLACK OR BLUE PEN or dark pencil and press firmly.
- FILL IN or CROSS the box next to the category that best describes your response (  or  ). PLEASE DO NOT USE TICKS.
- Choose ONE ONLY for each question unless it states otherwise.  
Example: Do you eat fruit?  Yes  No

## Local Church Code

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AP



### 1. How often do you go to church services (worship services) at this local church?

- |   |   |
|---|---|
| <input type="checkbox"/> This is my first time              | <input type="checkbox"/> Once a month               |
| <input type="checkbox"/> Hardly ever/special occasions only | <input type="checkbox"/> Two or three times a month |
| <input type="checkbox"/> Less than once a month             | <input type="checkbox"/> Usually every week         |
|   | <input type="checkbox"/> More than once a week      |

### 2. How long have you been going to church services or activities at this local church?

- |   |  |
|---|--|
| <input type="checkbox"/> Less than 1 year | <input type="checkbox"/> More than 20 years                                  |
| <input type="checkbox"/> 1-2 years        | <input type="checkbox"/> I am visiting from another local church             |
| <input type="checkbox"/> 3-5 years        | <input type="checkbox"/> I am visiting and do not regularly go anywhere else |
| <input type="checkbox"/> 6-10 years       |  |
| <input type="checkbox"/> 11-20 years      |  |

### 3. Are you regularly involved in any group activities here? (Mark ALL that apply)

- Yes, in small prayer, discussion or Bible study groups
- Yes, in fellowships, clubs, social or other groups
- No, we have no such groups
- No, I am not regularly involved

### 4. Do you regularly take part in any activities of this local church that reach out to the wider community? (Mark ALL that apply)

- Yes, in evangelistic or outreach activities
- Yes, in community service, social justice or welfare activities of this local church
- No, we don't have such activities
- No, I am not regularly involved

### 5. Do you have a strong sense of belonging to this local church/congregation?

- Yes, a strong sense of belonging, which is growing
- Yes, a strong sense - about the same as last year
- Yes, although perhaps not as strongly as in the past
- No, but I am new here
- No, and I wish I did by now
- No, but I am happy as I am
- Don't know/Not applicable

### 6. What is the STARTING TIME of the church service(s) that you regularly attend here? (Mark up to TWO)

**This service** (Leave blank if you are a visitor)

(Write time, e.g. 09:45 and mark am or pm, and day of week)

↳ 

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 am  pm  Sun  M  T  W  T  F  Sat

### Another church service you regularly attend here

(Only fill this in if it applies to you)

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 : 

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 am  pm  Sun  M  T  W  T  F  Sat

### 7. Before you started coming here, were you participating in another local church?

- No, I've come here for most/all of my life
- No, before coming here I had not been attending church for several years
- No, before coming here I had never regularly attended a church
- Yes, immediately prior to coming here, I was participating in another local church

### 8. Before you started coming here, what was the denomination of your previous church? (Mark ONE only)

- I did not attend elsewhere before coming here
- The same denomination as this local church
- Not the same denomination as this local church

### 9. In what year were you born?

Please write the year in the squares:

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### 10. What is your gender?

- Female  Male

*NB: If you identify as 'Other', this option is in the online survey.*

### 11. What is the highest educational qualification you have completed?

- |   |  |
|---|--|
| <input type="checkbox"/> Primary school               | <input type="checkbox"/> Bachelor degree from a university or equivalent institution |
| <input type="checkbox"/> Some secondary school        | <input type="checkbox"/> Postgraduate degree or diploma                              |
| <input type="checkbox"/> Completed secondary school   |  |
| <input type="checkbox"/> Trade certificate            |  |
| <input type="checkbox"/> Diploma or associate diploma |  |

### 12. Which term best describes your present marital status?

- |  |  |
|--|--|
| <input type="checkbox"/> Never married           | <input type="checkbox"/> In a defacto relationship |
| <input type="checkbox"/> In first marriage       | <input type="checkbox"/> Separated                 |
| <input type="checkbox"/> Remarried after divorce | <input type="checkbox"/> Divorced                  |
| <input type="checkbox"/> Remarried after widowed | <input type="checkbox"/> Widowed                   |

### 13. Do you have a spouse or partner who is also completing a survey form here?

- Yes  No

### 14. What is your employment status? (Mark ALL that apply)

- Employed full-time (30 hours or more)
- Employed part-time
- Unemployed
- Student
- Full-time home duties/family responsibilities
- Self-employed
- Retired
- Other

This form will be scanned - Please mark boxes  and WRITE NUMBERS CLEARLY to help scanning process

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Please do not write here



**15. What is the postcode of the place where you usually live?**

Please write in the squares:

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**16. Are you of Aboriginal or Torres Strait Islander origin?**

- Yes  No

**17. Where were you born? Where was your mother born?**

**Where was your father born?**

*(Please mark an option in EVERY COLUMN)*

	You	Mother	Father
Australia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New Zealand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pacific Islands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
United Kingdom/Ireland	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Northern or Western Europe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Southern Europe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eastern Europe/former USSR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Middle East/North Africa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Republic of South Africa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Africa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
North America	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central or South America	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
China/Hong Kong	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Korea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vietnam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Philippines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
India/Sri Lanka	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Asia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**18. At home, do you speak a language other than English?**

- English only  
 English plus other language(s)  
 Non-English language(s) only

**About Your Faith**

**19. Over the last year, do you believe you have grown in your Christian faith?**

- No real growth  
 Some growth  
 Much growth, mainly through this local church  
 Much growth, mainly through other groups or churches  
 Much growth, mainly through my own private activity

**20. How often do you spend time in private devotional activities (e.g. prayer, meditation, Bible reading alone)?**

- Every day/most days  Occasionally  
 A few times a week  Hardly ever  
 Once a week  Never

**21. Do you identify with any of the following approaches to matters of faith? (Mark up to TWO options)**

- Catholic or Anglo-Catholic  Pentecostal  
 Charismatic  Progressive  
 Evangelical  Reformed  
 Liberal  Traditionalist  
 Lutheranism  I do not identify with such descriptions  
 Moderate

**22. How important is God in your life?**

- God does not matter to me at all  
 Fairly important, but many other things are more important  
 God is more important to me than almost anything else  
 God is the most important reality in my life

**About You and This Local Church**

**How often do you experience the following during church services at this local church?**

*(Mark one box on EACH line)*

	Always	Usually	Some-times	Rarely /Never
<b>23. Preaching very helpful to my life</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>24. Music I appreciate</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>25. Inspiration</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>26. A sense of God's presence</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>27. Growth in understanding of God</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>28. Being challenged to take action</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Do you agree or disagree with the following statements?**

**29. I would support the development of new initiatives in ministry and mission in this local church**

- Strongly agree  Disagree  
 Agree  Strongly disagree  
 Neutral/Unsure

**30. I have found it easy to make friends within this local church**

- Strongly agree  Disagree  
 Agree  Strongly disagree  
 Neutral/Unsure

**31. Which of the following aspects of this local church do you personally most value? (Mark up to THREE options)**

- Wider community care or social justice emphasis  
 Reaching those who do not attend church  
 Traditional style of worship or music  
 Contemporary style of worship or music  
 Sharing in Holy Communion/the Eucharist/Lord's Supper  
 Social activities or meeting new people  
 Sermons, preaching or Bible teaching  
 Small prayer, discussion or Bible study groups  
 Ministry to children or youth  
 Praying for one another  
 Practical care for one another in times of need  
 Openness to social or cultural diversity  
 Presence of a church school or pre-school

**32. Are you involved in any community service, social action or other groups not connected to this local church?**

*(Mark ALL that apply)*

- Yes, community service, care or welfare groups
- Yes, social action, justice or lobby groups (e.g. environmental, human rights, local issues)
- Yes, sports, recreation or hobby groups
- Yes, school or youth groups (e.g. P&C, Scouts)
- Yes, another kind of group (e.g. arts, cultural, political)
- No, I'm not involved with such groups

**33. Do you believe that Christians have a responsibility to actively care for the environment?**

- Yes, and I am very active
- Yes, and I am a little active
- Yes, but I am currently not active
- No
- Unsure

**34. In the past 12 months, have you done any of the following? (Mark ALL that apply)**

- Lent or gave money to someone outside your family
- Cared for someone who was very sick
- Helped someone through a personal crisis (not sickness)
- Visited someone in hospital
- Given some of your possessions to someone in need
- Tried to stop someone abusing alcohol or drugs
- Donated money to a charitable organisation
- Contacted a parliamentarian/councillor on a public issue
- None of the above

**35. Which of the following best describes your readiness to talk to others about your faith?**

- I do not have faith, so the question is not applicable
- I do not like to talk about my faith; my life and actions are sufficient
- I find it hard to talk about my faith in ordinary language
- I mostly feel at ease to talk about my faith if it comes up
- I feel at ease to talk about my faith and look for opportunities to do so

**36. Would you be prepared to invite to a church service here any of your friends and relatives who do not currently attend a church?**

- Yes, and I have done so in the past 12 months
- Yes, but I have not done so in the past 12 months
- Don't know
- No, probably not
- No, definitely not

**37. If you know someone who is a new arrival here do you personally seek to make them welcome?**

- Yes, always
- Yes, mostly
- Yes, sometimes
- Rarely or never
- Not applicable (I don't meet new arrivals here)

**38. If you knew someone was drifting away from church involvement, how likely is it that you would take the time to talk with them about it?**

- Certain
- Very likely
- Likely
- Hard to say
- Unlikely

**Leadership and Direction**

**39. Do you currently perform any of these leadership or ministry roles here? (Mark ALL that apply)**

- Teaching/preaching
- Music ministry
- Children's ministry role
- Youth ministry role
- Small group leadership
- Administrator role
- Lead/assist in church services
- Council/board/elder/deacon
- Committee/task force member
- Pastoral care/visitation role
- Some other role
- No such role

**40. Have this local church's leaders encouraged you to find and use your gifts and skills here?**

- Yes, to a great extent
- Yes, to some extent
- Yes, to a small extent
- Not at all
- Don't know

**41. Does this local church have a clear vision, goals or direction for its ministry and mission?**

- I am not aware of such a vision, goals or direction
- There are ideas but no clear vision, goals or direction
- Yes, and I am strongly committed to them
- Yes, and I am partly committed to them
- Yes, but I am not committed to them

**42. To what extent does this local church's leaders take into account the ideas of the people here?**

- A great extent
- Some extent
- A small extent
- Not at all
- Don't know
- There is currently no leader here

**43. How confident are you that this local church can achieve the vision, goals or directions it has set for itself?**

- Fully confident
- Partly confident
- Not confident
- Don't know how confident I am
- The vision, goals or directions are not clear enough to me

**Do you agree or disagree with the following statements? (Mark one box on EACH line)**

**44. This local church is always ready to try something new**

Strongly agree	Agree	Neutral /Unsure	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**45. Leaders here inspire me to action**

Strongly agree	Agree	Neutral /Unsure	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**46. Leaders here encourage innovation and creative thinking**

Strongly agree	Agree	Neutral /Unsure	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**47. Leaders here keep us strongly focused on connecting with people in the wider community**

Strongly agree	Agree	Neutral /Unsure	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**48. This local church has good and clear systems for how it operates**

Strongly agree	Agree	Neutral /Unsure	Disagree	Strongly disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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**49. Do you have gifts, skills or talents in any of the following?  
(Mark ALL that apply)**

- Arts and Crafts: building, visual, textile
- Communication: write, edit, speak
- Education: teach, coach
- Finances: accounts, financial management
- Hospitality: welcome, host, provide food
- Interpersonal: build relationships, care for people
- Music: play, sing, write music
- Leadership/Management: lead, manage, plan, organise
- Research/Analytical: collect information, analyse, report
- Technical: computers, sound, light
- Other gift, skill or talent
- Don't know

**50. Do you agree or disagree that your gifts and skills  
(selected above) are used well in this local church?**

- Strongly agree
- Agree
- Neutral/Mixed feelings
- Disagree
- Strongly disagree
- Don't know/Not applicable

**51. Are you as involved at this local church as you would  
like to be?**

- I would like to be more involved
- I am happy with my current level of involvement
- I would like to be less involved
- I am unsure

**52. About how much do you give financially to this  
local church?**

- I give 10% or more of net income regularly
- I give about 5% to 9% of net income regularly
- I give less than 5% of net income regularly
- I give a small amount whenever I am here
- I do not contribute financially here

**How satisfied are you with what is offered here for  
each of the following age groups?**

*(Please answer even if nothing age-specific is offered)*

**53. For people  
your own age**

Very satisfied	Satisfied	Neutral /Unsure	Dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**54. For children  
aged under  
12 years**

Very satisfied	Satisfied	Neutral /Unsure	Dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**55. For youth  
aged 12-18  
years**

Very satisfied	Satisfied	Neutral /Unsure	Dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**56. In your opinion, which of the following should be given  
priority by this local church in the next 12 months?  
(Mark up to THREE options)**

- Spiritual growth (e.g. spiritual direction, prayer groups)
- Worship services that are nurturing to people's faith
- Building a strong sense of community within this local church
- Creating a clear vision for this local church's future
- Encouraging people here to discover/use their gifts
- Encouraging new approaches to ministry and mission
- Supporting social justice and aid to people in need
- Encouraging people here to share their faith or invite others
- Ensuring new people are included well in church life
- Ministry to children and youth
- Growing into a larger local church
- Starting a new church or mission venture
- Other area
- Don't know

**About Your Children**

**57. How many children do you have (who are still living)?**

- None    1    2    3    4    5 or more

**58. Please answer the questions below for each of your  
children who are still living, starting with the eldest.**

If you have more than 5 children, answer for the first 5.

	Eldest Child	Child No 2	Child No 3	Child No 4	Child No 5
<b>What is his/ her age in years?</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	years	years	years	years	years

<b>Does he/ she live at home?</b>	Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Does he/she attend church regularly? (Mark all that apply)**

	Eldest Child	Child No 2	Child No 3	Child No 4	Child No 5
Yes, here	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, somewhere else, same denomination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes, at another denomination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Thank you for your help today**