



Participant Personal Health Scale

Directions: Make a copy of this document and please save it to your own Google Drive. Add your name to the title. Give yourself an overall rating for each indicator and highlight one number under each indicator. There are 6 sections and each is worth 5 points total, so by the end you should have a total out of 30 points. If you rate yourself as a 1 or 2 please identify the areas that you know need improvement. If you rate yourself as a 4 or 5 please list out the evidence that would support that. After completing each section, then give yourself an overall rating in the top points section.

Healthy Personal Life

Needs Improvement	Healthy	Thriving
0-21	22-25	26-30

	Indicator 1 Spend regular time with God	Indicator 2 Have margin in your life	Indicator 3 Healthy body, mind, and emotions	Indicator 4 Using spiritual gifts regularly within your given ministry field/business and personal life	Indicator 5 Finances are in good order-no debt, follow a budget	Indicator 6 Healthy Relationships	Total
Value	5	5	5	5	5	5	30
Your Score							



● **Indicator 1: Spend regular time with God**

Areas for Improvement	Criteria	Evidence of Thriving
	- Consistently read your Bible 4-5 times a week - Pray throughout the day - Have additional times of worship/connection through music, devotions, being outside etc. - Attend church/some form of corporate worship regularly	
1.....2	3.....	4.....5

● **Indicator 2: Have margin in your life**

Areas for Improvement	Criteria	Evidence of Thriving
	- Have consistent, scheduled times for rest and relaxation - Each day of the week allows for some kind of rest - walk, reading, tv series etc. - You are able to flex and adjust a day's activities to meet your own needs and/or the needs of others	



1.....2	3.....	4.....5
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• **Indicator 3: Healthy body, mind, and emotions**

Areas for Improvement	Criteria	Evidence of Thriving
	• You are active and exercising at least 3-4 times a week • You make healthy food choices - fruits, vegetables, limit sugars, fats, processed foods • You consistently cook meals instead of eating out • You get at least 7 hours of sleep each night • You keep on top of important appointments - dental, vision, physicals etc. • You keep a positive attitude • You are aware of negative thought patterns/lies and take them captive • You are mindful and have boundaries around the content you consume • You give yourself space and time to acknowledge and process your emotions	



1.....2	3.....	4.....5
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Indicator 4: Using spiritual gifts regularly within your given ministry field/business and personal life

Areas for Improvement	Criteria	Evidence of Thriving
	- You know what your spiritual gifts are - You are using your spiritual gifts in some form to do your job - You are using your spiritual gifts to serve your family - You are using your spiritual gifts to build up the body of believers - You are using your spiritual gifts in some form to serve your community	
1.....2	3.....	4.....5

Indicator 5: Finances are in good order-no debt, follow a budget

Areas for Improvement	Criteria	Evidence of Thriving
	- You make more than you spend - All of your bills are	



	being paid and are paid on time - You have a budget - You keep to your budget - You are regularly and consistently tithing (at least 10%) - You are out of debt or have an active and aggressive plan to remove your debt - You are not accumulating more debt	
1.....2	3.....	4.....5

• **Indicator 6: Healthy relationships**

Areas for Improvement	Criteria	Evidence of Thriving
	- Family is your first ministry - You regularly eat meals together - You spend time together - outdoors, playing games etc. - You practice your faith together - church, family devotions, prayer etc. - You actively pursue relationships with believers	



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	• You actively pursue relationships with nonbelievers • You invest time in your local church • You invest time in your local community	
1.....2	3.....	4.....5