Spiritual Inclusion Plan

Name:			Date:	
Desired Type of Involve	ment/Spiritual Expre	ssion		
D Exploration	C onnecting	□ Maintaining	Changing or Deepening	
Please briefly describe the	valued outcome, goal, a	and or activities for this	Spiritual Inclusion Plan	
				,
·			ation activities should be planned when a person would like to learn	

more about spirituality, religions, and specific practices and/or experience different types of spiritual activities to assist in making an informed decision about what spiritual direction and/or faith tradition they would like to select in the long term.

> Spiritual Inclusion Plan Page 1 of 4

For each of the following congregational and other religious activities, indicate the desired level of involvement, need for support, and provider of support.

	What involvement would he or she like? If none , indicate this.	What supports are needed to make this happen meaningfully?	How will these supports be provided? Who will take primary responsibility?
Worship services			
Sunday/Sabbath school or other religious education programs			
Small groups or Bible studies			
Fellowship, recreational, and other social activities			

	What involvement would he or she like? If none , indicate this.	What supports are needed to make this happen meaningfully?	How will these supports be provided? Who will take primary responsibility?
Opportunities to serve within the congregation			
Outreach, service, and ministry opportunities outside of the congregation			
Other activities:			

Will transportation need to be arranged or provided?	🗖 No	□ Yes:
------------------------------------------------------	------	--------

Back Up: _____

Will direct support from staff need to be provided?	🗖 No	□ Yes:
Back Up:		
Will a behavior support plan need to be developed?	🗖 No	□ Yes:
Back Up:		
Who has been a part of this conversation? (Name/Relation	iship)	Who else should we invite to be part of this conversation?
When will this plan be revisited to determine whether it is	working o	r needs to be strengthened?
We will update this plan in months. Due Date:		
What future needs should be considered or might be antic	ipated whe	en this plan is updated?