

SHAPE: Master-Crafted for Ministry

Identifying My Lived Experiences

A lived experience is an experience that changes an individual. This is associated with hardships, problems, risk taking, effort and originality whereby individuals stretch themselves to improve their character, talents and knowledge. Life experience can be found in both failures and successes, positives and negatives, but is seldom a passive experience. For example, if you travel it may be the problems you face that end up being transformative and memorable whereas moments of convenience and comfort may have little effect. The following are common types of life experience. Check the ones you have made a profound impact on you.

- | | |
|--|--|
| <input type="checkbox"/> Adventure &/or Risk Taking | <input type="checkbox"/> Meaningful conversations |
| <input type="checkbox"/> Aging | <input type="checkbox"/> Marriage |
| <input type="checkbox"/> Alienation | <input type="checkbox"/> Military service |
| <input type="checkbox"/> Building things | <input type="checkbox"/> Moments of wonder |
| <input type="checkbox"/> Business success &/or Failure | <input type="checkbox"/> Mistakes &/or Failures |
| <input type="checkbox"/> Celebrations &/or Holidays | <input type="checkbox"/> Natural disasters |
| <input type="checkbox"/> Coaching &/or Mentoring | <input type="checkbox"/> Obstacles and/or Difficulties |
| <input type="checkbox"/> Conflict Resolution | <input type="checkbox"/> Overcoming a fear |
| <input type="checkbox"/> Dealing with difficult people | <input type="checkbox"/> Overcoming a limitation |
| <input type="checkbox"/> Dealing with uncertainty | <input type="checkbox"/> Parenting |
| <input type="checkbox"/> Demonstrating courage | <input type="checkbox"/> Personal reflection |
| <input type="checkbox"/> Difficult conversations | <input type="checkbox"/> Personal sacrifice |
| <input type="checkbox"/> Disappointment | <input type="checkbox"/> Practice & self-discipline |
| <input type="checkbox"/> Diverse environments | <input type="checkbox"/> Project management |
| <input type="checkbox"/> Divorce, separations & breakups | <input type="checkbox"/> Public speaking |
| <input type="checkbox"/> Emergencies | <input type="checkbox"/> Pursuing intentions &/or goals |
| <input type="checkbox"/> Enduring being misunderstood | <input type="checkbox"/> Reconciliation & redemption |
| <input type="checkbox"/> Experiences in nature | <input type="checkbox"/> Reading &/or Study |
| <input type="checkbox"/> Family | <input type="checkbox"/> Recreation &/or Hobbies |
| <input type="checkbox"/> Faith &/or Religion | <input type="checkbox"/> Rejection &/or Acceptance |
| <input type="checkbox"/> Fired &/or laid off | <input type="checkbox"/> Responsibilities &/or Accountability |
| <input type="checkbox"/> Forgiveness given or received | <input type="checkbox"/> Retirement |
| <input type="checkbox"/> Freedom &/or Independence | <input type="checkbox"/> Rites of passage |
| <input type="checkbox"/> Friendships | <input type="checkbox"/> Romance &/or Relationships |
| <input type="checkbox"/> Goal achievement | <input type="checkbox"/> School, College, &/or Vocational Training |
| <input type="checkbox"/> Grand-parenting | <input type="checkbox"/> Selfless acts |
| <input type="checkbox"/> Immersion in a new culture | <input type="checkbox"/> Sickness &/or Physical pain |
| <input type="checkbox"/> Influencing people | <input type="checkbox"/> Social events |
| <input type="checkbox"/> Insults &/or injustices | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Intensive periods of training | <input type="checkbox"/> Starting a business |
| <input type="checkbox"/> Leadership | <input type="checkbox"/> Taking the high road |
| <input type="checkbox"/> Loss of loved ones | <input type="checkbox"/> Teaching &/or Tutoring |

- Teamwork
- Travel
- Volunteering &/or Serving

- Work, Carrier, &/or profession
- Other _____

FROM THE EXPERIENCES CHECKED ABOVE, CHOOSE THE 3 THAT HAVE HAD THE GREATEST IMPACT ON YOU – DESCRIBE WHAT HAPPENED ALONG WITH WHY AND HOW IT IMPACTED YOU AS A PERSON.

Experience 1:

Experience 2:

Experience 3:

WRITE YOUR 3 MOST IMPACTFUL LIVED EXPERIENCES ON THE SPACES PROVIDED UNDER EXPERIENCES IN YOUR SHAPE PROFILE (LOCATED AT THE END OF THIS BOOKLET).