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<b>INSTRUCTIONS:</b> This report is to be completed by all ministerial students of The Wesleyan Church and is to be submitted to the district board of ministerial development at the time designated by the district (Discipline 1390:7-10; 1402). Pastors submit a "Pastor's Annual Service Report." Associate/Assistant pastors submit an "Associate/Assistant Pastor's Service Report", non-pastoring ordained ministers or commissioned ministers submit a "Minister's Annual Service Report." If you desire to expand on any of your answers, please go to "Additional Remarks" at the end of this form and record your comments there. Be sure to begin your comments with, "Regarding No. 1" or whatever the number of the question might be.							
PERSONAL INFORMATION							
LAST NAME	FIRST NAME			MIDDLE INITIAL			
DISTRICT			FOR	FISCAL YEAR ENDING			
MAILING ADDRESS (STREET/P.O. BOX)							
CITY		STATE <b>OR</b> PROVINCE		POSTAL CODE			
HOME ADDRESS (IF DIFFERENT FROM MAILING ADDRESS	5)						
CITY		STATE OR PROVINCE	PO	STAL CODE			
CELL PHONE NUMBER			·				
WORK PHONE NUMBER							
HOME PHONE NUMBER							
PRIMARY EMAIL ADDRESS			BIRTH	BIRTH DATE (mm/dd/yyyy)			

## A. SERVICE UPDATE 1. The district conference granted you a ministerial student's license at its last session (3015:1, 3350:2). Describe briefly how you served in the local church or elsewhere this past year. 2. Are you using your talents and gifts for ministry? Yes No 3. Are you in a local church residency program? Yes No 4. Do you faithfully and regularly attend the services of a Wesleyan church? Yes No 4.a. If yes, which one? If no, please explain. 5. Each Wesleyan Minister must hold membership at a Wesleyan church to maintain credentials within The Wesleyan Church. Disc. 3097. Give the name of the local Wesleyan church and city where your membership resides in good standing. **B. PREPARATION** 6. In order to meet the educational requirements for ministry, what courses did you complete this past church year? 7. What are your educational goals for the year? **C. PERSONAL RESPONSIBILITIES** 8. How are you progressing in your journey to live a life that is blameless and above reproach, and setting a good example of the lifestyle and conduct described in the Guides and Helps to Holy Living? 9. Are you involved in a relationship, questionable activity or addictive behavior which, if not properly addressed, will harm or Yes No destroy your ministry? 9.a. If yes, please explain.

D. LEGAL ACCOUNTABILITES		
15. Since your last Annual Service Report, have you been accused or found guilty of any criminal activity?	Yes	No
15.a. If <u>yes</u> , please explain.		
16. Since your last Annual Service Report, have you participated in, or been accused of, any sexual misconduct (such	Yes	No
as fornication, adultery, child abuse [pedophilia], the sexual abuse of adolescent minors, or homosexuality?)	100	110
16.a. If <u>yes</u> , please explain.		
17. Are there any pending legal actions which might incriminate you in the future?	Yes	No
17.a. If <u>yes,</u> please explain.		
D. OUTLOOK		
<b>18.</b> Are you requesting a change in your category of appointment or district relations (1240)?	Yes	No
18.a. If <u>yes</u> , state what change you desire.		

## SIGNATURE

Please sign in ink. Electronic submission constitutes signature.

## ADDITIONAL REMARKS

Use this space to register all added comments. Be sure to number your comments to correspond with the number of the question upon which you are giving more information.

Regarding No.\_\_\_\_:

What ideas or suggestions do you have for the district leadership to consider?

WHEN YOU HAVE COMPLETED THIS DOCUMENT, BE SURE TO PRINT AND SAVE A COPY FOR YOUR RECORDS.