

<b>Name</b>				
(last name - first name - middle initial)		(town/city plus church name)		
<b>District</b>		<b>For district fiscal year ending</b>	<b>2016</b>	
<p><b>THE WESLEYAN CHURCH</b>  <b>Minister's Annual Service Report</b>  <b>To the District Conference</b></p> <p><b>INSTRUCTIONS:</b> This report is to be completed by all ministers of The Wesleyan Church who are <u>not</u> pastors or evangelists, (including ordained ministers, commissioned ministers and licensed ministers) and is to be submitted to the district board of ministerial development at the time designated by the district (<i>Discipline</i> 1390: 7-10; 1402). Pastors submit a "Pastor's Annual Service Report." Associate/Assistant pastors submit an "Associate/Assistant Pastor's Service Report." Evangelists submit a "Evangelist's Service/Statistical Report." <b>If you desire to expand on any of your answers, please go to "Additional Remarks" at the end of this form and type your comments there. Be sure to begin your comments with, "Regarding No. 1" or whatever the number of the question might be.</b></p>				
<b>A. Appointment</b>				
1. To what category of service were you appointed by the district conference at its last session (3250; 3370)?				<input type="text"/>
2. Describe briefly how you have served in that category of service this past conference year. (Use the space at the end of this form to complete your response.)				
3. Have you sought faithfully by your personal dealings and by your public ministry to lead sinners to a saving knowledge of Jesus Christ?				<input type="text"/>
To lead believers into the experience of entire sanctification?				<input type="text"/>
4. Have you endeavored to carry out all that The Discipline requires of you as a minister in your particular field of service? (Discipline 725)				<input type="text"/>
If not, please explain in the space at the end of this form.				
5. In self-evaluation, how would you assess your affirmation of loyalty to these agencies of the Church:				
a. General Church		<input type="text"/>	b. District	
		<input type="text"/>	c. Educational Institutions	
		<input type="text"/>		
If your assessment is "medium" or "low" it suggests you may have recommendations to offer. Please explain in the space at the end of this form.:				
<b>B. Personal Responsibilities</b>				
6. Have you endeavored to live a life that is blameless and above reproach, thereby providing a good example of the life-style and conduct required by the Membership Commitments of The Wesleyan Church?				<input type="text"/>
7. Are you currently involved in a relationship, questionable activity or addiction, which, if not properly addressed, will harm or destroy your ministry?				<input type="text"/>
8. Is your personal spiritual relationship with Christ continuing to grow or has it plateaued?				<input type="text"/>
Give testimony of spiritual progress or requests for special needs in the space at the end of this report.				
9. Are you fully committed to uphold the doctrines of The Wesleyan Church, its Articles of Religion and Membership Commitments as defined in <i>The Discipline</i> ?				<input type="text"/>
10. Are there unresolved problems (represented by questions 6, 7, 8, or 9) for which you would welcome or need counsel?				<input type="text"/>
If yes, would you be willing to seek counsel and therapy through the direction of the DBMD, or other appropriately sponsored/approved district referral program? <b>Confidential helpline: 1-877-REVCARE or 1-877-738-2273.</b>				
11. Is it your purpose to be effective in the practice of personal evangelism?				<input type="text"/>
If you have a related testimony or request to share, please use the space at the end of this report.				
12. Continuing education: What continuing education goals have you achieved this past year? Please list achieved goals in the space at the end of this report.				
13. Have you faithfully tithed your income to The Wesleyan Church during this past year?				<input type="text"/>
<b>C. Legal Accountabilities</b>				
14. Since your last report to the district conference, have you been accused or found guilty of any criminal activity? If yes, please explain in the space at the end of this report.				<input type="text"/>
15. Since your last report, have you participated in, or been accused of, any sexual misconduct (such as fornication, adultery, child abuse [pedophilia], the sexual abuse of adolescent minors or homosexuality)? If yes, please explain in the space at the end of this report.				<input type="text"/>
16. Are there any pending legal actions which might incriminate you in the future? If yes, please explain in the space at the end of this report.				<input type="text"/>

**D. Outlook**

17. Are you ready to renew or accept appointment (3250) at the hand of the conference again this year?

If not, please list your reasons in the space at the end of this report.

18. Are you requesting a change in your category of appointment or district relations (1240)?

If so, please state what change you desire, in the space at the end of this report.

**F. Personal Information**

**19. SIGNATURE**

[Please sign in ink. Electronic submission constitutes signature.] →

20. Mailing Address (Street or P.O. Box)

21. City/State or Province/Postal Code

22. Home Address (if different from mailing address)

23. City/State or Province/Postal Code

24. Home Telephone

26. Cell phone number

28. Fax

30. Church phone

25. Year of ordination:

27. Secular work phone number

29. Preferred Email address:

31. Highest level of education (General Education): Use space at the end of this form to answer questions regarding Education and Ministry Training.

32. Level of Ministry Education/Non-Traditional (unaccredited) Training: Traditional Ministry Ed.

33. Name of local Wesleyan Church, city and district where your covenant membership currently resides in good standing. →

34. If not a covenant member of The Wesleyan Church, name of the local church, address and denomination affiliation where church membership currently resides in good standing. →

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

35. Type of ministerial employment [check one]
- Full-time minister without other employment
  - Full-time minister with other employment
  - Part-time minister without other employment
  - Part-time minister with other employment

36. Length of time in your current assignment      Years: →       Months: →

37. Your gender →       38. Your birth date →

**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. Double-click in the large box below to start.**

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

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