

2021 Charge Conference Instruction Form

District Wide Charge Conference

One District-Wide Charge Conference will be held this year. The location will be provided once details are finalized. All completed forms (with attachments) are due to the district office **ONE MONTH*** prior to the District-Wide Charge Conference date.

Packets due by close of business on:

- | | | | |
|-----------------------|-----------------------|----------|------------------------------|
| • Central District: | Sunday, November 14 | 5:00 pm | Thursday, October 14 |
| • Northeast District: | Saturday, November 13 | 10:00 am | Wednesday, October 13 |
| • Northwest District: | Sunday, November 14 | 3:00 pm | Thursday, October 14 |
| • Southeast District: | Sunday, November 7 | 5:00 pm | Thursday, October 7 |
| • Southwest District: | Sunday, November 7 | 3:00 pm | Monday, September 27* |

Charge Conference Packet

- Charge Conference packets/forms may be found online at www.arumc.org under the “forms” tab. **These forms MUST be downloaded first.** Upon downloading and saving the PDF version of the forms to your computer, you must use Adobe Acrobat or Adobe Reader to open the file in order to enter your data. The Windows 10 version of a pdf reader will not allow you to fill in the forms. Adobe Reader is free and can be downloaded from www.adobe.com. If downloading Adobe Reader is not possible, the Word version of the forms should be downloaded.
- The *Pastor’s Membership Report* and the *Pastor’s Compensation Form* (available in both Word and PDF versions) are set up to calculate totals. *Navigation Tip:* Use the “TAB” key to navigate through the forms. If you hit “Enter/Return” by accident, just backspace or “UNDO.” The calculations are executed by tabbing to the next field.
- *The Safe Sanctuary Policy, Financial Policy, Accountable Reimbursement Policy, and Accessibility Audit/Plan are to be reviewed, signed and dated annually by the chairperson and pastor. A copy of each should be placed on file in the church office and submitted to the district office annually as part of the charge conference records.*
- Make a copy of the packet and distribute each report to the person who will complete it, with a clear deadline well ahead of the Board/Council meeting to consider the packet.
- A checklist of Charge Conference documents and attachments is included to help you track the different reports.

Submitting your packet for the District Wide Charge Conference:

- Contents of the Charge Conference packet must be approved by the Church Council/Administrative Board/Governing Body **before submitting to the District Office.**
- Schedule and advertise a Board/Council meeting prior to the date your packet is due in the district office. All reports should be presented to the Board/Council at this meeting. The Board/Council will vote to *receive the reports and to recommend the packet to the District Wide Charge Conference for final approval.*
- During the Board/Council meeting, the recording secretary will complete the 2021 Board Recommendation for Charge Conference (page 2 in the packet)
- Following the meeting, mail, email, or deliver **ONE (1) copy** of the Charge Conference packet for each church to your District Superintendent’s office. Remember to print a copy for the church files. Deadline for this is one month prior to the date of the District Wide Charge Conference.
- Materials should not be presented in a binder, as this must be taken apart and placed in the permanent file. Please do not staple any forms together as all staples have to be removed for scanning.

Board Recommendation for Charge Conference

The following church/charge held a meeting of the Church Council/Administrative Board/governing board to recommend each church's charge conference packet for approval at the District-Wide Charge Conference:

Congregation name(s) here _____

The Board Meeting was held on _____, 2021 at _____:_____ am pm

The Board Meeting was chaired by _____.

*Recording Secretary is to initial each item
indicating the governing board has reviewed and is recommending the Charge Conference Packet.*

| Items that require a vote to approve: | Recording secretary initials | DISTRICT OFFICE USE |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|---------------------|
| Membership Report <i>(Including names read 1st year and 2nd year for removal)</i> <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 | | |
| Pastor's Compensation Record(s) for all appointed or assigned pastors | | |
| Lay Servants <i>(attach list if needed)</i> Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Renewal Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Renewal Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Renewal Certified Lay Speakers Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Renewal | | |
| Candidates for Ministry - Form 104 Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Continuance Name _____ <input type="checkbox"/> Initial Yr. Approval <input type="checkbox"/> Continuance | | |
| Nominations Committee <input type="checkbox"/> Approval of the slate of officers <i>(slate must be in packet)</i> <input type="checkbox"/> Any revisions <i>(including nominations from the floor of the conference)</i> _____ <input type="checkbox"/> List of all committees | | |
| Required Written Reports: | | |
| <input type="checkbox"/> Pastor's Written Report <i>(all appointed/assigned pastors)</i> <input type="checkbox"/> Retired Clergy Report(s) <i>(if applicable)</i> <input type="checkbox"/> Signed Finance Report <input type="checkbox"/> Signed Trustee Report <input type="checkbox"/> Signed Policy on Misconduct of Sexual Nature <input type="checkbox"/> 200,000 More Reasons' Report <input type="checkbox"/> Culture of Call <input type="checkbox"/> Updated Local Church Leadership List | | |
| Policies to Submit: | | |
| <input type="checkbox"/> Safe Sanctuary Policy <input type="checkbox"/> Accountable Reimbursement Policy <i>(if applicable)</i> <input type="checkbox"/> Financial Control Policy <input type="checkbox"/> Current Insurance Declarations Page <input type="checkbox"/> Accessibility Audit and Plan <i>(if applicable)</i> | | |

The Church Council/Administrative Board/governing board of the pastoral charge approves of submitted recommendations and reports, and hereby recommends these submissions to the District-Wide Charge Conference for adoption.

Recording Secretary (print) _____

Recording Secretary Signature _____

DISTRICT OFFICE USE

The Charge Conference approved the submitted packet on _____ at _____.

District Superintendent Signature _____

2021 Charge Conference Packet Checklist

This page is provided for your use in preparation of the packet to send to the District Office prior to your charge conference.

Church _____ Pastor _____

All completed forms (with attachments) are due to the district office on your assigned date, prior to the Charge Conference date.

- Pastor's Membership Report
- Signed Pastor's Compensation Page
- Signed Report of the Lay Servant
- Ministry Candidates (Form 104)
- Nominations (use either Traditional Structure Form or the Simplified Structure form, both included, or you may supply your own)
 - Lay Member to Annual Conference Form
 - Church Governing Structure Form
 - Nominations Form completed with names and contact info
- Signed Report of the Trustees
- Signed Finance Report
- Pastor's Written Report
- 200,000 More Reasons Report
- Signed Retired Clergy Report - only those not appointed
- Policy Statement on Sexual Misconduct with signatures of officers, volunteers, and staff
- Culture of Call

Policies and Documents to be submitted with this packet:

- Local Church Current Insurance Declarations Page for each policy
- UPDATED Local Church Leadership List -- Created by the conference database, this document is specific to your church and was sent from the District Office. Update by hand (do not type) preferably with red ink
- Local Church Financial Policy (to accompany signature page from this packet)
- Local Church Safe Sanctuary Policy (to accompany signature page from this packet)
- Local Church Accountable Reimbursement Policy (if pastor has Accountable Reimbursement in compensation package)

Pastor's Membership Report

This report is done on a yearly basis and is dated from prior year Charge Conference date to current year Charge Conference date.

Church _____

Period beginning (prior Charge Conference date) _____, 2020 and ending (current Charge Conference date) _____, 2021

A. Membership at 2020 Charge Conference *(Revised, if applicable, following a membership audit conducted since prior year charge conference. Please note any changes to the reported prior year number on an attached membership audit page.)*

(A) _____

B. New Members *(Attach as a list by each category)*

Received into professing membership since the last charge conference

- 1. On profession of faith or restored (1) _____
- 2. Transferred from other United Methodist churches (2) _____
- 3. Transferred from other non-United Methodist churches (3) _____

Total Members Received (Lines 1+2+3) = (B) _____

Note: Include only the names of those received into baptized membership since the last charge conference on your attached list of new members. Do not include Baptized Members in the numerical count of Professing Members.

C. Removed from Membership *(Attach as a list by each category)*

- 4. By action of the Charge Conference. *(number of names in F)* (4) _____
- 5. By trial court, or by withdrawal (5) _____
- 6. By transfer to other United Methodist churches (6) _____
- 7. By transfer to other non-United Methodist churches (7) _____
- 8. By death *(Please include date of death)* (8) _____

Total Professing Members Removed (Lines 4+5+6+7+8)= (C) _____

D. Membership at 2021 Charge Conference (A + B - C)= (D) _____

E. Names of Persons Filed with Charge Conference for Next Year's Removal *(First year reading)*

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

F. Names of Persons Being Recommended for Removal at this Charge Conference

(Second year reading - record the number in C4 above)

*Note that the Discipline requires these to be considered **individually!***

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

G. Have Membership Books Been Audited? Yes No

If not, why not?

2022-2023 Pastor's Compensation Form

Please see instructions concerning the change of the fiscal year on page 2.

Pastor _____ Church _____

For Period of: July 1, 2022 through June 30, 2023 or _____ - _____

Full-time

Part time

2021 July 2022-June 2023

(to be used through June 2022)

| | | | | |
|---------|----------------------------------------------------------------|-----------|--|--|
| Housing | Parsonage Provided | Yes or No | | |
| | Date of (S)PPRC chairperson parsonage inspection | | | |
| | Housing Allowance <i>May only be used in lieu of parsonage</i> | | | |

| | | | | |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----|--|
| Payment | Church Contribution to Pastor Compensation (<i>Salary from Church</i>) | 1 | | |
| | Equitable Compensation or other Conference Support <i>Compensation support received from the Annual Conference</i> | 2 | | |
| | Cash Allowances paid directly to pastor without documentation required <i>(non-accountable plans not already included in line 1)</i> | 3 | | |
| | Utilities and Appurtenances <i>Amount paid to pastor for utilities and other housing related expenses under designation by the church. See IRS Publication 517 for more information.</i> | 4 | | |
| | TOTAL OR GROSS CASH PAYMENT <i>Add Lines 1-4</i> | 5 | | |
| Deductions | Flexible Spending Plan <i>This is a FSP that the pastor sets following IRS Cafeteria Plan Section 125 Rules. This may NOT be used for health insurance premiums. It is a before tax payroll deduction which is elected annually and is a Use it or Lose it amount.</i> | 6 | | |
| | UMPIP Contribution - <i>This is a voluntary amount elected by the pastor to be paid into UMPIP. FOR CHURCH MATCH, FULL TIME PASTORS MUST CONTRIBUTE AT LEAST 1% OF COMPENSATION (LINE 5 + HOUSING).</i> | 7 | | |
| | UMPIP Contribution - <i>Is this tax-deferred?</i> | Yes or No | 7b | |
| | 403B Contribution to Other than UMPIP <i>This is a contribution to an IRA held with a bank or investment firm. There must be a voluntary compensation reduction agreement on file with the church and you may elect it to be tax-deferred.</i> | 8 | | |
| | Total Payroll Deductions <i>Add lines 6-8</i> | 9 | | |
| Net | Net Compensation Paid to Pastor <i>Subtract Line 9 from Line 5</i> | 10 | | |
| Total | TOTAL CASH COMPENSATION <i>Transfer from Line 5</i> | 11 | | |
| Reimburse | Accountable Reimbursement <i>This is only paid out via voucher, with receipts required, and represents maximum available. Pension for full time is not paid on this amount. Written Reimbursement Policy Must Be Agreed Upon and On File at Church</i> | 12 | | |
| Appointment | TOTAL COMPENSATION & REIMBURSEMENTS <i>Add Lines 11 and 12</i> | 13 | | |
| *Benefits | Does the church provide group insurance for the staff in which the pastor participates? | Yes or No | 14 | |
| | How many weeks of vacation time will the pastor receive this year? <i>(p.303-304, 2020 Arkansas Conference Journal)</i> | | 15 | |

**For all full-time pastors, the church will be responsible for a pension benefit of 14% of total comp (line 11) plus housing and will be billed directly by the conference office. This is a benefit and not included in the total compensation paid to the pastor.*

The Pastor Parish Relations Committee recommends compensation after consultation with the pastor and the District Superintendent. The recommendation is reported to the Finance Committee and the Administrative Board/Council for discussion and agreement. The Charge Conference sets compensation. The church is obligated to compensate the pastor at this level until the end of the conference year. (§624.1)

Pastor signature _____ Treasurer signature _____ S/PPRC Chairperson signature _____

 District Superintendent signature _____

For District Office Use Only

Date entered in database _____
 Pension billing share for multiple point charges _____

2022-2023 Pastor's Compensation Form Instructions

The compensation form is updated to match the conference appointive and fiscal year of July 1 - June 30. Congregations should continue paying the 2021 compensation for the first six months of 2022. The new annual compensation will be applied to begin July 1, 2022. If a congregation seeks to increase compensation for January - June 2022, (¶624.1.), it should complete an additional compensation form using annualized amounts, indicate the appropriate effective dates, and include the additional form in the Charge Conference Packet for approval.

Housing

- **Parsonage Provided** – If your church provides a parsonage answer “Yes” otherwise answer “No”
- **Date of Parsonage Inspection** – Write the date of the last inspection of the church owned parsonage. If the church does not provide a parsonage then leave this line blank.
- **Housing Allowance** – List the amount of money the church provides for the pastor's housing allowance. This is only in lieu of a church owned or leased parsonage. The pastor does not have to provide the church receipts for reimbursements of these funds. This amount may be reported on box 14 of the pastor's W2. **This amount is paid in addition to the amount on Line 13.**

Payment

- **Church Contribution to Pastor Compensation** – List the total pastor's salary as approved by the charge/church conference prior to any deductions. Do not include other compensation items listed below (Equitable Compensation, Cash Allowances, or Utilities and Appurtenances) or housing allowance.
- **Equitable Compensation or other Conference Support** – List all funds received from the Conference for the support of the salary for the pastor.
- **Cash Allowances** – List any amount paid to the pastor for non-accountable cash allowances. This may include, but not limited to car or travel allowance, discretionary funds, and/or expense accounts.
- **Utilities and Appurtenances** – List funds designated for use by the pastor for housing related expenses as provided for by IRS section 107. This may include utilities, furnishings, or other non-consumable housing related expenses. More information on this topic can be found in IRS Publication 517 or by visiting <https://www.gcfa.org/services/legal-services/gcfa-tax-packet/>.

Deductions

- **Flexible Spending Plan** – These plans sometimes referred to as Cafeteria 125 plans may only be used in conjunction with a bona fide group health care plan. If the church does not offer the pastor health care coverage through a group plan, then flexible spending plans may not be used for health care reimbursements. In other words, these plans cannot be used to reimburse medical expenses, including premiums for plans bought through the medical exchange.
- **UMPIP Contribution** – This is the voluntary contribution by the pastor to the United Methodist Personal Investment Plan (UMPIP). These funds may be withheld on either a tax-deferred or tax-paid basis. At least 1% of plan compensation (Line 5 plus housing) must be contributed in order to receive a 1% matching contribution.
- **UMPIP Contribution Tax Deferred** – If the contribution from the prior line is contributed on a tax-deferred basis then write “Yes” on line 7b. If the contribution is being made after-tax write “no.”
- **403B Contribution Other Than UMPIP** – List any amount being contributed to a retirement fund for the pastor other than UMPIP. Please indicate whether this is being made on a tax-deferred basis.

Reimbursements and Benefits

- **Accountable Reimbursement** – Fund established to reimburse the pastor for expenses. This should only be established with a written policy set by the church and requires written documentation of expenses. For more information and sample policies visit <https://www.gcfa.org/services/legal-services/gcfa-tax-packet/>. Pension is not paid on this amount.
- **Does the Church Provide Group Insurance for You** – Please write yes or no if the church provides group insurance for the staff for the calendar year in which YOU participate.

Minimum Compensation for Full Time Clergy (p.183-184, 2020 Arkansas Conference Journal)

- Minimum compensation for full time clergy is set by the Annual Conference, as recommended by the Conference Commission on Equitable Compensation.
- Minimum compensation for full time clergy appointments in church settings must be set at or above the standards (as noted on line 11 of the compensation form). **A parsonage or housing allowance in lieu of a parsonage shall be provided in addition to the figures listed below.**

| | | |
|--------------------------|----------------------------------------|-----------------------|
| Full Connection \$48,330 | Provisional, Associate Member \$47,280 | Local Pastor \$46,230 |
|--------------------------|----------------------------------------|-----------------------|

Appointed pastors serving a charge that provides a group health insurance plan shall be subject to the following minimum compensation support.

| | | |
|--------------------------|----------------------------------------|-----------------------|
| Full Connection \$36,330 | Provisional, Associate Member \$35,280 | Local Pastor \$34,230 |
|--------------------------|----------------------------------------|-----------------------|



**CERTIFIED LAY SERVANT
ANNUAL REPORT TO THE CHARGE CONFERENCE**

- Initial Application
- Request for Renewal

SECTION I: DATA ON THE LAY SERVANT

Name *(please print)* _____

Address _____ City/State/Zip _____

Telephone _____ Email _____

Name of District _____

Name of Church _____

Church Address _____ City/State/Zip _____

Church Telephone _____

SECTION II: STATUS OF THE LAY SERVANT

 For initial application as a Certified Lay Servant

1. What year did you complete your Basic Course? _____
2. What year did you complete your Advanced Course? _____
3. What was the title of your Advanced Course? _____

 For renewal as a Certified Lay Servant

1. What year did you complete your last Advanced Course? _____
2. What was the title of your last Advanced Course? _____

SECTION III: REQUEST OF THE LAY SERVANT

I request the recommendation of my pastor and my church council/charge conference to begin/renew as a Certified Lay Servant for the ensuing year.

Lay Servant signature _____ **Date** _____

SECTION IV: RECOMMENDATION OF THE PASTOR

I recommend concurrence with the request of this person to begin/renew as a Certified Lay Servant for the ensuing year.

Pastor signature _____ **Date** _____

SECTION V: RECOMMENDATION OF THE CHURCH COUNCIL/CHARGE CONFERENCE

The church council/charge conference of _____ *(church/charge)*
recommends the above person begin/renew as a Certified Lay Servant for the ensuing year.

Church Council Chair or District Superintendent signature _____

Date _____



(To be completed by those requesting renewal as a Certified Lay Servant)

Name *(please print)* _____

SECTION VI: MINISTRIES BY THE LAY SERVANT

During the past year, I have participated in ***caring ministries*** by:

- ___ volunteering in a care-giving institution such as a hospital or nursing home; or caring for a shut-in
- ___ providing one-on-one caring
- ___ membership/evangelism visitation
- ___ serving in caring/outreach projects (food pantry, prison ministry, etc)
- ___ other caring activities *(please list)* _____

During the past year, I have participated in ***leading ministries*** by:

- ___ serving as a member of committee, board, commission, council, task force, etc.
- ___ volunteering at a community agency
- ___ leading at my local church
- ___ leading beyond my local church
- ___ leading in my District ___ Conference ___ Jurisdiction ___ General Church level
- ___ other leading activities *(please list)* _____

During the past year I have participated in ***communicating ministries*** by:

- ___ bringing message in _____ worship services
- ___ serving as worship leader in _____ services
- ___ delivering _____ devotional messages
- ___ teaching _____ classes
- ___ sharing my faith story _____ times
- ___ other speaking activities *(please list)* _____

During the past year I have participated in the following additional opportunities for ministry *(attach additional page if needed)*

SECTION VII: PERSONAL AND SPIRITUAL GROWTH BY THE LAY SERVANT

In what activities have you engaged and/or what books have you read or used during the past year to help you develop your devotional life; improve your understanding of the Bible; improve your understanding of The United Methodist Church; and to improve your skills in caring, leading, communicating and speaking?

SECTION VIII: FEEDBACK BY THE LAY SERVANT

1. Do you feel called to be in service in any area of ministry, either in the church or outside the church, in which you are not currently involved? ___ Yes ___ No If yes, please let those areas below.

2. What additional training or support do you need or would suggest to further your ministry?

3. Give any recommendations you have for improving Lay Servant Ministries in your District or Conference.

Note: District directors are encouraged to respond to any comments within this section.

**THE UNITED METHODIST CHURCH
DECLARATION OF CANDIDACY FOR ORDAINED MINISTRY
CHARGE CONFERENCE RECOMMENDATION
(or equivalent body)**

This form is to be completed on all new or continuing candidates for ministry.

Candidate Name: *(please print)* _____ **Charge:** _____ **Date:** _____

For Continuing Candidates:

I hereby request **continuation** of my candidacy for ordained ministry in The United Methodist Church and request support and recommendation of the Charge Conference for continued certification as a candidate for:

Order of Deacons Order of Elders License as Local Pastor

For New Candidates:

I hereby declare my candidacy for ordained ministry in The United Methodist Church and request the support and recommendation of the Charge Conference or equivalent body as specified by the district committee on ordained ministry for certification as a candidate for:

Order of Deacons Order of Elders License as Local Pastor

CHARGE CONFERENCE RECOMMENDATION (or equivalent body)

Let those who consider recommending persons for candidacy as ordained ministers in The United Methodist Church ask themselves the following questions which were first asked by John Wesley at the third conference of Methodist preachers in 1746. (See Discipline ¶310)

1. Do they know God as a pardoning God? Have they the love of God abiding in them? Do they desire nothing but God? Are they holy in all manner of conversation?
2. Have they gifts, as well as grace, for the work? Have they a clear, sound understanding; a right judgment in the things of God; a just conception of salvation by faith? Do they speak justly, readily, clearly?
3. Have they fruit? (Elder and Local Pastor) Have any been truly convinced of sin and converted to God, and are believers edified by their preaching? (Deacon) Are others edified by their service?

Believing that _____ is called of God and is a suitable candidate for ordained ministry in the United Methodist Church, (the recommending body) _____ recommends him/her for certification as a candidate to the District Committee on Ordained Ministry. In making this recommendation, we attest to the fact that the declared candidate has been a professing member in good standing of The United Methodist Church or a baptized participant of a recognized United Methodist campus ministry or other United Methodist ministry setting for a minimum of one (1) year, has graduated from an accredited high school or received a certificate of equivalency, and has received by written ballot a two-thirds vote of this body.

Signature of authorized elder, district superintendent, or bishop

Date

Conference

District

This Declaration of Candidacy for Ordained Ministry should be sent to the district office for the candidate's file.

Nominations

Election of Lay Member and Alternate Lay Member to Annual Conference

Lay Member Elected by Each Charge - From ¶32, 2016 Book of Discipline of the United Methodist Church

“Each charge served by more than one clergy shall be entitled to as many lay members as there are clergy members. The lay members shall have been for the two years next preceding their election members of The United Methodist Church and shall have been active participants in The United Methodist Church for at least four years next preceding their election. If the lay membership should number less than the clergy members of the annual conference, the annual conference shall, by its own formula, provide for the election of additional lay members to equalize lay and clergy membership of the annual conference.”

Lay and Alternate Lay Members of the Arkansas Annual Conference from your church or charge **are the church members elected at this charge conference**. Every church or charge is allowed a set number of lay members and alternate lay members to vote at Annual Conference, depending upon the number of clergy eligible to vote who are serving in the congregation or charge. A church in “to be supplied” status has a vote and will need to elect a Lay Member to Annual Conference. **To ensure each charge is represented, clergy are asked to contact lay and alternate lay members from the church or charge during late January and ask them to confirm again that they will be able to attend for all days of the session.** If there is a reason the lay member cannot attend one day, or even a portion of a day, ensure the alternate lay member is informed and will be present. Please note: Your Lay Leader is not automatically considered your Lay Member to Annual Conference; you will need to elect a Lay Member to Annual Conference and list them accordingly. During Annual Conference, only the votes of the official lay member elected at charge conference (or the elected alternate in the lay member’s absence) may be counted on the church or charge’s behalf. One’s vote cannot be transferred to someone else except by having another charge conference and selecting them as the lay member.

The Annual Conference Lay Member(s) and Alternate Lay Member(s) to Annual Conference for

(charge/church) _____ is/are as follows:

Annual Conference Lay Member and Alternate (one Lay Member per appointed clergy/assigned lay pastor)

| | NAME | EMAIL | PHONE | ADDRESS |
|------------|------|-------|-------|---------|
| Lay Member | | | | |
| Alternate | | | | |

Additional Lay Members and Alternates for additional appointed clergy (add 2nd page if needed)

| | | | | |
|------------|--|--|--|--|
| Lay Member | | | | |
| Lay Member | | | | |
| Alternate | | | | |
| Alternate | | | | |

Nominations Report

Church Governing Structure

Church _____

Select ONE

_____ **This church uses the Traditional Structure for governance.**

(The traditional structure has separate Disciplinary committees for Church Council, Finance, Trustees, and SPRC.)

Continue to page 12 (and skip page 13) to complete the Traditional Structure Nominations page OR submit your own Nominations list. Then update the Local Church Leadership page emailed from the district office. PLEASE make certain that the names on the Nominations Form match the names and contact information on the updated Local Church Leadership form.

OR

_____ **This church uses the Simplified Structure for governance.**

(The Simplified Structure, which must be approved by the DS and is based on ¶247.2 of the 2016 Book of Discipline, usually operates with a nominations committee and a single governing board that fulfills the Disciplinary functions of Church Council, Trustees, Finance, and Staff/Pastor-Parish Relations Committee. Some congregations operate on a variation of this model approved by the DS)

Skip to page 13 and complete the Simplified Structure Nominations OR submit your own Nominations list. Then update the Local Church Leadership page emailed from the district office. PLEASE make certain that the names on the Nominations Form match the names and contact information on the updated Local Church Leadership form.

District Superintendent approval is required to transition to the Simplified Structure. Variants of the Simplified Structure may be required by your DS, such as organizing a separate and independent S/PPRC.

_____ The congregation requests approval from the District Superintendent to transition from a traditional structure to an alternate simplified structure for 2022.

Nominations - Complete EITHER the Traditional Structure OR the Simplified Structure Form

You may use this page to list your Nominations or submit your own Nominations list.

Nominations - Traditional Structure

Church

| Administrative (Church) Council | | EMAIL | PHONE | ADDRESS |
|------------------------------------------------------------------------------------------------------------------------------------|------|---------------|-------|---------------|
| NAME | | | | |
| Chair | | | | |
| <i>Membership includes the committee chairs listed below and these AT-LARGE committee members - contact information not needed</i> | | | | |
| Class of 2022 | | Class of 2023 | | Class of 2024 |
| | | | | |
| | | | | |
| Finance | | EMAIL | PHONE | ADDRESS |
| NAME | | | | |
| Chair | | | | |
| <i>List names of committee members below - contact information not needed</i> | | | | |
| Class of 2022 | | Class of 2023 | | Class of 2024 |
| | | | | |
| | | | | |
| Trustees | | EMAIL | PHONE | ADDRESS |
| NAME | | | | |
| Chair | | | | |
| <i>List names of committee members below - contact information not needed</i> | | | | |
| Class of 2022 | | Class of 2023 | | Class of 2024 |
| | | | | |
| | | | | |
| Staff-Parish Relations | | EMAIL | PHONE | ADDRESS |
| NAME | | | | |
| Chair | | | | |
| <i>List names of committee members below - contact information not needed</i> | | | | |
| Class of 2022 | | Class of 2023 | | Class of 2024 |
| | | | | |
| | | | | |
| Nominations Committee (Pastor is Chair) <i>List names of committee members below - contact information not needed</i> | | | | |
| Class of 2022 | | Class of 2023 | | Class of 2024 |
| | | | | |
| | | | | |
| Treasurer | NAME | EMAIL | PHONE | ADDRESS |
| | | | | |
| Lay Leader | NAME | EMAIL | PHONE | ADDRESS |
| | | | | |

Nominations - Complete EITHER the Traditional Structure OR the Simplified Structure Form

You may use this page to list your Nominations or submit your own Nominations list.

Nominations - Simplified (Alternative) Structure

Church

The use of this Simplified Structure is based on ¶247.2 of the 2016 Book of Discipline. District Superintendent approval is required to transition to the Simplified Structure. Variants of the Simplified Structure may be required by your DS, such as organizing a separate and independent S/PPRC. Elect 9-15 persons and indicate which member is serving as Chair, Lay Leader, Lay Member to Annual Conference, SPPR Contact & Trustee Chair. It is HIGHLY recommended that the CHAIR serve as the SPPR Contact and Trustees Chair.

The following persons will serve as the governing board, fulfilling the Disciplinary functions of Church Council, Trustees, Finance, and Staff/Pastor-Parish Relations Committee.

| Term to Serve | NAME | PHONE NUMBER | EMAIL | ROLE [Board Chair, SPPR Contact, Trustee, Finance] |
|------------------------------------------------------|------|--------------|-------|----------------------------------------------------|
| Class of 2022 | | | | |
| | | | | |
| | | | | |
| | | | | |
| Class of 2023 | | | | |
| | | | | |
| | | | | |
| | | | | |
| Class of 2024 | | | | |
| | | | | |
| | | | | |
| | | | | |
| Ex Officio Members MAY BE ELECTED (with vote) | | | | |
| UM Women Rep. | | | | |
| UM Men Rep. | | | | |
| UM Youth Rep. <i>Youth under 18 is not a Trustee</i> | | | | |

CHURCH OFFICERS

| Treasurer | NAME | EMAIL | PHONE | ADDRESS |
|---------------|------|-------|-------|---------|
| | | | | |
| Lay Leader | NAME | EMAIL | PHONE | ADDRESS |
| | | | | |
| Trustee Chair | NAME | EMAIL | PHONE | ADDRESS |
| | | | | |
| SPPR Contact | NAME | EMAIL | PHONE | ADDRESS |
| | | | | |

COMMITTEE ON NOMINATIONS AND LEADERSHIP DEVELOPMENT

¶258.1 – The committee is composed of not more than nine persons in addition to the pastor and lay leader. It shall include at least one young adult, and may include one or more youth.

| | | |
|-----------------------------|----------------------|----------------------|
| Pastor (Chairperson) | | |
| Lay Leader | | |
| Class of 2022 | Class of 2023 | Class of 2024 |
| | | |
| | | |

Pastor's Written Report

In churches with appointed associate pastors or deacons, each clergy person should complete a report.

Pastor Name

Church/Charge

Date

Report of Retired Clergy to the Charge Conference

Name _____ Email _____
 Address _____ City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____

The Church in which your Charge Conference Membership is held:

¶ 357.5 All retired clergy members who are not appointed as pastors of a charge, after consultation with the pastor and the district superintendent, shall have a seat in the charge conference and all the privileges of membership in the church where they elect to hold such membership except as set forth in the Discipline. They shall report to the charge conference and to the pastor all marriages performed, baptisms administered, and other pastoral functions. If they reside outside the bounds of the annual conference where membership is held, they shall forward annually to the charge conference where membership is held a report of their Christian and ministerial conduct, signed by the district superintendent or the pastor of the affiliate charge conference where they reside.

Charge _____
 Church City _____ State _____
 Current Pastor _____

Report of Activities

(from 2020 Charge Conference to 2021 Charge Conference)

| | |
|-------------------------------------------------------------------------|--|
| A. Number of Worship Services Conducted: | |
| B. Number of Marriages Performed: | |
| C. Number of Baptisms Conducted: | |
| D. Number of Communion Services Celebrated: | |
| E. Notes and Other Activities Related to the Ministerial Office: | |
| | |

Signature

Date

*Send a copy to the appointed pastor of your church.
 The Pastor will include it with the Charge Conference packet.
 Please keep a copy for your files.*

200,000 More Reasons Report

Page 1 of 2

CHURCH _____

200,000 More Reasons: Nutrition, Literacy, Stability is an initiative of the ARUMC where local churches provide or support ministries around accessing food and reading at grade-level as well as offer programs that promote a healthy, stable family life for food insecure children and their families. Please report any ministry provided or supported by your congregation that helps low-income children and their families. There is not a specific designation as a 200,000 More Reasons ministry; if you are providing or supporting a ministry then it is counted!

NUTRITION

Please list the types of ministries which you provide or support (financially, volunteers, or space, etc.) that help feed children and their families who are hungry or at-risk for going hungry? (check all that apply)

- | | |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Food Pantry for the community | <input type="checkbox"/> Food Pantry at a school |
| <input type="checkbox"/> Backpack/Bag of food for the weekend | <input type="checkbox"/> Blessing Box/Little Free Pantry |
| <input type="checkbox"/> Other <i>Emergency</i> food distribution | <input type="checkbox"/> Food collection for own or a local pantry |
| <input type="checkbox"/> Commodities distribution | <input type="checkbox"/> Afterschool snack program or distribution |
| <input type="checkbox"/> Meal served at the church | <input type="checkbox"/> Meal served away from the church |
| <input type="checkbox"/> Cooking classes or Cooking Matters | <input type="checkbox"/> SNAP Application Assistance |
| <input type="checkbox"/> Support, volunteer or member of a regional food bank agency (banks distribute food to pantries) | |
| <input type="checkbox"/> Garden (produce is given to those in need or to a food distribution program) | |
| <input type="checkbox"/> Gleaning (leftover produce from fields or farmer's markets is gathered & distributed) | |
| <input type="checkbox"/> Public Witness or advocacy for policies that assist hungry children | |
| <input type="checkbox"/> Other _____ | |

Please provide contact information for the leader of each of your Hunger and Nutrition ministries:

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT NAME | EMAIL | PHONE | ADDRESS |
|--------------|-------|-------|---------|
| | | | |

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT NAME | EMAIL | PHONE | ADDRESS |
|--------------|-------|-------|---------|
| | | | |

LITERACY

Please list the types of ministries which you provide or support (financially, volunteers, or space, etc.) that work to encourage literacy skills of children who are hungry or at-risk for going hungry. (check all that apply)

- | | |
|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> After school tutoring or homework help <i>onsite</i> at church | <input type="checkbox"/> Little Free Library or similar |
| <input type="checkbox"/> After school tutoring or homework help <i>offsite</i> | <input type="checkbox"/> Summer literacy program |
| <input type="checkbox"/> Members serve as reading tutors at a local school | <input type="checkbox"/> Book club for young readers, ages 0-18 |
| <input type="checkbox"/> Reading time as a group or individually with kids as part of a feeding ministry | <input type="checkbox"/> Book distribution |
| <input type="checkbox"/> Imagination Library support or assistance with sign-up | <input type="checkbox"/> Partner in Education with local school |
| <input type="checkbox"/> Other _____ | |

Please provide contact information for the leader of each of your Literacy ministries:

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT NAME | EMAIL | PHONE | ADDRESS |
|--------------|-------|-------|---------|
| | | | |

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT NAME | EMAIL | PHONE | ADDRESS |
|--------------|-------|-------|---------|
| | | | |

200,000 More Reasons Report

Page 2 of 2

CHURCH _____

STABILITY

Please list the types of ministries for **families at-risk for hunger** that support their mental or physical health and/or a stable family life.
(check all that apply)

- Healthy eating or dieting
- Opioid and other Substance Abuse Crisis Support
- Mental Health Support, such as counseling or group work
- Work related skills development (job, interviewing, etc.)
- Child fostering or adoption programs
- Support groups for single parents, grandparents raising kids or other at-risk factors
- Other physical health ministries
- Exercise
- Drug and Alcohol Recovery Support
- Resourcing/Referring to other services
- Parenting, marriage, or financial skills development
- Other mental health ministries

Please provide contact information for the leader of each of your Family Stability ministries:

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT PERSON | EMAIL | PHONE | ADDRESS |
|----------------|-------|-------|---------|
| | | | |

Name of Ministry: _____ Year Ministry Began: _____ Contact Person Clergy or Lay

| CONTACT PERSON | EMAIL | PHONE | ADDRESS |
|----------------|-------|-------|---------|
| | | | |

PLANS FOR NEXT YEAR

Please share plans for ministries of nutrition, literacy, and/or family stability for low-income/at-risk children and their families in the next year.

Report of the Trustees

Page 1 of 3

The Trustees are amenable to the Charge Conference and as such are required to make an annual report.

Church _____ Charge _____ District _____

Period beginning (prior Charge Conference date) _____, 2020 and ending (current Charge Conference date) _____, 2021

1. Is the local church incorporated (§2529.1)? Yes No
2. Name(s) in which title to each piece of property is recorded, as shown by civil land records (§2538, 2536). Does each deed contain a Trust Clause (§2503)? (Attach list if needed)

| | Name(s) | Trust Clause | County Clerk Office | Book | Page |
|------------------|---------|----------------------------------------------------------|---------------------|------|------|
| Church Buildings | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Church Buildings | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Parsonages | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Land | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Other | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

3. Who is the custodian of deeds/other legal papers? _____

4. Where are they kept? _____

(It is recommended these documents be kept in a safety deposit or lock box, or contact the district office for guidance.)

5. Do you have a long-term plan for the maintenance and replacement of facilities and equipment?
 Yes No

6. Have the buildings been inspected for fire, mold, and other safety hazards within the past year? Yes No

If not, what are your plans for addressing safety hazards?

7. Has an accessibility audit for church properties been conducted and placed on file in the church office (§2533.6) and submitted to the District Office?

Accessibility Audit Form may be found at: <http://www.gcfa.org/forms> Yes No

If not, what are your plans for creating accessibility?

Report of the Trustees

Page 2 of 3

8. Insurance (§2533.2, 2550.7). Name of insurance company(s), type of coverage, and expiration date(s) for church property and/or parsonage, and **attach a copy of all insurance declarations pages.**

Company _____ Coverage type _____ Expiration date _____

Company _____ Coverage type _____ Expiration date _____

Company _____ Coverage type _____ Expiration date _____

Company _____ Coverage type _____ Expiration date _____

9. Provide a detailed list of endowments, income-producing and permanent funds.

(Attach list if needed)

| Item | Date Received | Amount | Where Invested | Income |
|------|---------------|--------|----------------|--------|
| | | | | |
| | | | | |
| | | | | |

Trustee Chair Signature

Printed Name

Date

Report of the Trustees

Page 3 of 3

Safe Sanctuary Policy

The Safe Sanctuary Policy has been reviewed (and revised, if necessary) and approved.
A copy is on file in the church office and district office.

| | | |
|--------------------------------|---------------------|-------------|
| <i>Trustee Chair Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|--------------------------------|---------------------|-------------|

| | | |
|-------------------------|---------------------|-------------|
| <i>Pastor Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|-------------------------|---------------------|-------------|

Include a copy of your Safe Sanctuary Policy.

**Include a copy of the declaration page for each insurance policy.
Do not include the entire policy, ONLY the declarations page is needed.**

Policy Statement on Misconduct of a Sexual Nature

This form is to be filled out for each church, properly signed and dated. This is to be done annually. Clearly indicate the name of the church in the proper places. This policy shall be read by the Board/Council, Pastor(s), and staff, adopted by the local Church and signed by the pastor, all staff and volunteers in children, youth, and vulnerable adult ministry areas.

Par. 1000 Policy Statement on Misconduct of a Sexual Nature

(Adopted by the Annual Conference on June 10, 2004; revised June 14, 2005; updated September 17, 2019)

I. Statement of Policy

The _____ United Methodist church affirms the *2016 Book of Resolution #2044, Sexual Abuse Within the Ministerial Relationship, and #2045, Eradication of Sexual Harassment in the United Methodist Church and Society*, which state that sexual abuse within the ministerial relationship and sexual harassment within the church are incompatible with biblical teachings of hospitality, justice, and healing. In accordance with the *2016 Book of Discipline* (§161.F) all human beings, both male and female, are created in the image of God, and thus have been made equal in Christ. As the promise of Galatians 3:26-29 states, all are one in Christ, we support equity among all persons without regard to ethnicity, situation, or gender. Sexual abuse within the ministerial relationship occurs when a person within a ministerial role of leadership (pastor, educator, counselor, youth leader or other position of leadership) engages in sexual conduct or sexualized behavior with a congregant, client, employee, student, staff member, co-worker, volunteer, person being counseled or any other person to whom the minister relates in his/her capacity as a minister. Sexual harassment is any unwanted sexual advance or demand, either verbal or physical that is reasonably perceived by the recipient as demeaning, intimidating, or coercive. Sexual abuse within the ministerial relationship involves a betrayal of sacred trust, a violation of the ministerial role and exploitation of those who are vulnerable. Similarly, sexual harassment must be understood as an exploitation of a power relationship rather than as an exclusively sexual issue. Misconduct of a sexual nature within the life of the church interferes with its moral mission. The _____ United Methodist Church stands in opposition to the sin of misconduct of a sexual nature in the Church and society at large and commits itself to fair and expedient investigation of any charge of sexual misconduct within the church and to take action deemed appropriate and in compliance with the Book of Discipline. Further, the United Methodist Church bears affirmative responsibility to create an environment of hospitality for all persons, male or female, which is free of misconduct of a sexual nature and encourages respect, equality, and kinship in Christ.

II. Procedures

A. If you experience what you consider to be inappropriate behavior, keep a written record of your experiences including dates, times, places, and witnesses. Keep any written material you may have received from the person. You may wish to confront the person with the inappropriate behavior and demand that it cease. If you choose not to confront the person alone, you may choose to ask someone to accompany you to confront the person and seek reconciliation. If you choose not to confront the person, or if the behavior continues, report the incident to the chair of the person's appropriate evaluating committee (e.g., a pastor or church staff member would be reported to the chair of the staff/parish relations committee; a district superintendent to the chair of the committee on superintendency; a bishop to the chair of the committee on episcopacy). If the conflict is not resolved to your satisfaction, the committee chair shall convene the entire committee to meet with the accused, the person bringing accusations, and each supporting person. If the situation is not resolved to your satisfaction following these efforts, then follow the Discipline's procedures for grievances, complaints, and charges.

B. If you are confronted by someone who has experienced or observed inappropriate behavior on your part, listen to the accusation and agree to change the behavior or otherwise resolve the situation and reconcile the relationship. If you are unable to resolve the situation with your accuser, contact the chair of your appropriate evaluating committee. Ask to meet with your accuser and committee chair to resolve the conflict. The accused and the person bringing the accusation each have the right to bring a supportive person to this meeting. If the conflict remains unresolved, the committee chair shall convene the entire committee to meet with the accused, the person bringing the accusation, and each supporting person.

C. If you receive a report of inappropriate behavior, listen seriously and objectively. Help the person follow the steps outlined above. If you are a clergy/church professional in a paid supervisory position in the local church or a conference agency, and an employee is being harassed, you should immediately take corrective or preventive action. According to Arkansas law, any person receiving a report from a child under age 18, indicating sexual abuse of that child, is required to report the abuse to the proper authorities.

Policy Statement on Misconduct of a Sexual Nature Signature Form

Adopted by the Church Council/Administrative Board on _____, 2021

This policy **shall** be read by the Board/Council, Pastor(s), and staff, adopted by the local church and signed by the pastor, all staff and volunteers in children, youth, and vulnerable adult ministry areas.

| SIGNATURE | SIGNATURE | SIGNATURE |
|-----------|-----------|-----------|
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Report of the Finance Committee

Page 1 of 3

Church _____ Charge _____ District _____

Period beginning (*prior Charge Conference date*) _____, 2020 and ending (*current Charge Conference date*) _____, 2021.

Employer Identification Number (EIN) _____

I. Organization

a) Has the committee been organized according to the 2016 Book of Discipline (§258.4)? Yes No

b) Names of Officers

Chairperson _____ Vice Chairperson _____

Treasurer(s) _____ Financial Secretary _____

II. Budget and Commitment Plan

a) How frequently does the Financial Secretary/Treasurer send members and contributors regular reports of their giving?

Monthly Quarterly Semi-annually Annually We do not send reports

b) Is the Finance Committee fulfilling its responsibility to make plans to raise sufficient funds to meet the budget adopted by the Church Council (§258.4)? Yes No

c) Does the Financial Secretary/Treasurer report regularly to the Church Council on the giving trends in the church/charge? Yes No
If not, then how are giving trends reported?

III. The Handling of Church Funds

a) Does the Treasurer regularly make reports to the Committee on Finance and the Church Council on the financial position of the church (§258.4b)? Yes No
If not, how are the Committee on Finance and the Church Council informed on financial matters?

b) Will your church pay 100% of their Conference Tithe this year? Yes No
If not, what is your plan to pay the Tithe this next year?

c) What bank(s) have been designated by the Church Council as a depository (§258.4d)?

Report of the Finance Committee

Page 2 of 3

- d) Are the church offerings counted by a counting committee of at least 2 (two) unrelated individuals? (§258.4a)? Yes No
Please list names
- e) Are all funds deposited promptly in accordance with procedures developed by the Finance Committee (§258.4a,d)? Yes No
- f) Are financial officers of the church bonded or insured (§258.4b)? Yes No
If no, why not?
- g) Have the financial records of the church and all its organizations been audited (or financially reviewed) for the prior fiscal year (§258.4d)? Yes No
1. Who conducted the audit or a financial review?
 2. When will you conduct an audit or financial review?
 3. Were there any recommendations or exceptions? Yes No
 4. If there were recommendations or exceptions, how has the church addressed them?
- h) Were all pastors and staff issued W 2's and not 1099's? Yes No

Finance Chair Signature

Printed Name

Date

Report of the Finance Committee

Page 3 of 3

Financial Control Policy

The Financial Control Policy has been reviewed (and revised, if necessary) and approved.
A copy is on file in the church office and district office.

| | | |
|--------------------------------|---------------------|-------------|
| <i>Finance Chair Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|--------------------------------|---------------------|-------------|

| | | |
|-------------------------|---------------------|-------------|
| <i>Pastor Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|-------------------------|---------------------|-------------|

Accountable Reimbursement Policy

Required only when compensation packages include accountable reimbursement

The Accountable Reimbursement Policy (if applicable) has been reviewed (and revised, if necessary) and approved.
A copy is on file in the church office and district office.

| | | |
|--------------------------------|---------------------|-------------|
| <i>Finance Chair Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|--------------------------------|---------------------|-------------|

| | | |
|-------------------------|---------------------|-------------|
| <i>Pastor Signature</i> | <i>Printed Name</i> | <i>Date</i> |
|-------------------------|---------------------|-------------|

Culture of Call

Church _____

Pastor _____

List persons involved in conversations or exploring a call to lay or ordained ministry:

| Name and Email Address | Age Generation | Potential Service <i>(if known)</i> <i>Mark all that apply</i> | Has person met with Pastor |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Name Email | <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School _____ Grad Date <input type="checkbox"/> Generation Z (College) <input type="checkbox"/> Millennial (20s & 30s) <input type="checkbox"/> Generation X (40s & 50s) <input type="checkbox"/> Baby Boomers (60s & 70s) | <input type="checkbox"/> Lay Vocational Ministry <input type="checkbox"/> Elder <input type="checkbox"/> Deacon <input type="checkbox"/> Licensed Local Pastor <input type="checkbox"/> Beyond local church <input type="checkbox"/> Other _____ _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Name Email | <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School _____ Grad Date <input type="checkbox"/> Generation Z (College) <input type="checkbox"/> Millennial (20s & 30s) <input type="checkbox"/> Generation X (40s & 50s) <input type="checkbox"/> Baby Boomers (60s & 70s) | <input type="checkbox"/> Lay Vocational Ministry <input type="checkbox"/> Elder <input type="checkbox"/> Deacon <input type="checkbox"/> Licensed Local Pastor <input type="checkbox"/> Beyond local church <input type="checkbox"/> Other _____ _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Name Email | <input type="checkbox"/> Elementary School <input type="checkbox"/> Middle School <input type="checkbox"/> High School _____ Grad Date <input type="checkbox"/> Generation Z (College) <input type="checkbox"/> Millennial (20s & 30s) <input type="checkbox"/> Generation X (40s & 50s) <input type="checkbox"/> Baby Boomers (60s & 70s) | <input type="checkbox"/> Lay Vocational Ministry <input type="checkbox"/> Elder <input type="checkbox"/> Deacon <input type="checkbox"/> Licensed Local Pastor <input type="checkbox"/> Beyond local church <input type="checkbox"/> Other _____ _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No |

List persons from your congregation currently preparing for ordained or licensed ministry:

| Name and Email Address | Age Generation | Potential Service <i>(if known)</i> <i>Mark all that apply</i> | Certified Candidate by dCOM |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Name Email | <input type="checkbox"/> High School _____ Grad Date <input type="checkbox"/> Generation Z (College) <input type="checkbox"/> Millennial (20s & 30s) <input type="checkbox"/> Generation X (40s & 50s) <input type="checkbox"/> Baby Boomers (60s & 70s) | <input type="checkbox"/> Elder <input type="checkbox"/> Deacon <input type="checkbox"/> Licensed Local Pastor <input type="checkbox"/> Beyond local church | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Name Email | <input type="checkbox"/> High School _____ Grad Date <input type="checkbox"/> Generation Z (College) <input type="checkbox"/> Millennial (20s & 30s) <input type="checkbox"/> Generation X (40s & 50s) <input type="checkbox"/> Baby Boomers (60s & 70s) | <input type="checkbox"/> Elder <input type="checkbox"/> Deacon <input type="checkbox"/> Licensed Local Pastor <input type="checkbox"/> Beyond local church | <input type="checkbox"/> Yes <input type="checkbox"/> No |