

**ANNUAL REPORT OF ORDAINED MINISTER OR LICENSED MINISTER**

(Not submitting a pastor's, evangelist's, or retired minister's report form)

*Manual 530.8, 536.9*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

District \_\_\_\_\_

Local Church Membership \_\_\_\_\_

Ministerial Status:  Ordained Elder  Ordained Deacon  District Licensed

Indicate your **approved ministerial role** for the coming year, in order that you may be classified correctly in the district journal (See pages two and three for details identified with each role/status code):

- |   |   |
|---|---|
| <input type="checkbox"/> Pastoral Service - Full-time | <input type="checkbox"/> Unassigned                   |
| <input type="checkbox"/> Pastoral Service - Part-time | <input type="checkbox"/> Missionary                   |
| <input type="checkbox"/> General Church Assignment    | <input type="checkbox"/> Education                    |
| <input type="checkbox"/> Special Service              | <input type="checkbox"/> Student                      |
| <input type="checkbox"/> Chaplain                     | <input type="checkbox"/> Christian Education Minister |
| <input type="checkbox"/> District Assignment          |   |
| <input type="checkbox"/> District Interim Assignment  |   |

Total number of lifelong learning hours\* completed this year \_\_\_\_\_

\*Twenty hours of lifelong learning is the minimum expectation each year, according to *Manual 527.6*.

Times preached \_\_\_\_\_ Calls made \_\_\_\_\_

In what ways have you supported the Church of the Nazarene?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attend faithfully as much as possible \_\_\_\_\_ Tithe to the Nazarene Church \_\_\_\_\_

Signature of Local Church Pastor \_\_\_\_\_

Date \_\_\_\_\_ Signed \_\_\_\_\_

*Mail **only page one** to your District Office no later than 90 days prior to your District Assembly.*