

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

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

*Manual 402.1, 427.9, 433.9*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

District \_\_\_\_\_

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

Ministerial Status:  Ordained Elder  Ordained Deacon  Licensed

Indicate your **approved ministerial role** for the coming year (for classifying you correctly in the District Minutes):

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

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

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

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

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

*Mail to District Secretary at least 30 days prior to your District Assembly.*