

ANNUAL REPORT OF ORDAINED MINISTER OR LICENSED MINISTER  
(Not submitting a pastor's, evangelist's, or retired minister's report form)  
Manual 429.8, 435.9

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"/> 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"/> Interdenominational/Special Service | <input type="checkbox"/> Student                      |
| <input type="checkbox"/> Chaplain                            | <input type="checkbox"/> Christian Education Minister |
| <input type="checkbox"/> District Assignment                 | <input type="checkbox"/> Other _____                  |
| <input type="checkbox"/> District Interim Assignment         |   |

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.