

<b>Name</b> →			
	(last name)	(first name)	(initial)
<b>District</b> →		For district fiscal year ending →	
<b>THE WESLEYAN CHURCH</b> <b>Retired Minister's Annual Service Report</b> <b>To the District Conference</b>  If you need more space in any box, use a separate sheet of paper and record your comments there.			
<b>A. Appointment</b>			
1. In what Wesleyan Church is your local membership held?			
2. Are you engaged in secular employment?		<input type="checkbox"/>	If yes, what?
<b>B. Personal Responsibilities</b>			
3. Together with your household, 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 (260; 265)?			
<input type="checkbox"/>		<input type="checkbox"/>	
4. Are you currently involved in a relationship, questionable activity or addiction, which, if not properly addressed will harm or destroy your ministry or influence?			
<input type="checkbox"/>		<input type="checkbox"/>	
5. Are you fully committed to uphold the doctrines of The Wesleyan Church, its Articles of Religion and Membership Commitments as as defined in <i>The Discipline</i> ?			
<input type="checkbox"/>		<input type="checkbox"/>	
6. Are there unresolved problems (represented by questions 3, 4, & 5) for which you would welcome or need counsel?			
<input type="checkbox"/>		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?	
<input type="checkbox"/>		<input type="checkbox"/>	
7. Would you accept invitations for pulpit supply or interim pastoral service?			
<input type="checkbox"/>		<input type="checkbox"/>	
8. If desired, give a brief testimony or special prayer request:			
<b>C. Legal Accountabilities</b>			
9. Of what nation are you a citizen?			
<input type="checkbox"/>		<input type="checkbox"/>	
10. If you are not a citizen of the country where you currently reside, what is your current visa or immigration status?			
<input type="checkbox"/>		<input type="checkbox"/>	
11. Since your last report to the district conference, have you been accused or found guilty of any criminal activity?			
If yes, please explain.			
12. 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)?			
<input type="checkbox"/>		If yes, please explain:	
13. Are there any pending legal actions which might incriminate you in the future?			
<input type="checkbox"/>		If yes, please explain:	

## D. Personal Information

**14. SIGNATURE:** →

15. Mailing Address (*Street or P.O. Box*)

16. City/State or Province/Postal Code

17. Home Address (if different from mailing address)

18. City/State or Province/Postal Code

19. Home Telephone

20. Year of ordination

21. Cell phone number

22. Secular work phone number

23. Fax

24. Email address

25. 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.**

26. Type of pastoral employment [check one] →

Fill out questions 26 & 27 only if you are employed in some form of pastoral ministry while holding Retired Ministerial credentials.

- Full-time pastor without other employment
- Full-time pastor with other employment
- Part-time pastor without other employment
- Part-time pastor with other employment

27. Length of time in your current assignment

Years: →

Months: →

28. Your gender →

29. Your birth date →