



# HIGHER EDUCATION & MINISTRY

General Board of Higher Education and Ministry

THE UNITED METHODIST CHURCH

## Annual Report of the Diaconal Minister

The United Methodist Church

### Demographic Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City, state, Postal Code \_\_\_\_\_

Nation \_\_\_\_\_

Home or cell telephone \_\_\_\_\_ Office telephone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

*Circle the phone number type you prefer for receiving professional calls.*

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

(Town & state of church) \_\_\_\_\_

Annual Conference to which you are related \_\_\_\_\_

Year of consecration \_\_\_\_\_

*For demographic purposes, please mark your ethnic identity:*

African American  Asian American  European American/Caucasian  Hispanic American

Native American  Pacific Islander  Other (please identify):

*For citizens of nations other than the U.S.:*

African  Asian  European/Caucasian  Latin American  Pacific Islander

Other (please identify):

## **Appointment Information**

Position/Appointment (title, employer, city and state):

Have you changed your appointment in the past year?

Area(s) of certification, licensing, or specialization:

Date of most recent renewal of certification or licensing:

Are you on leave? If so, what year did this leave begin?

Please reflect on the ways have practiced servant ministry in the church and world in the past year. Use additional pages if necessary.

In what ways have you fulfilled your plans for professional growth during the past year (including spiritual enrichment, service, missional, and continuing education opportunities)?

Describe your plans for continuing education for the upcoming year.

*Attach the evaluation of your immediate supervisor regarding ways in which you have been faithful to your call. The supervisor, as deemed appropriate by the conference Board of Ordained Ministry, may be the senior pastor, pastor/staff-parish relations committee, agency supervisor, district superintendent, staff of the conference council on ministries, or the president of your board of directors, if applicable.*

Your signature \_\_\_\_\_

Date \_\_\_\_\_

*Annual reports for certification and diaconal ministry may be combined for filing with your charge conference.*

**Submit this form to:**

Conference Board of Ordained Ministry

Charge Conference

General Board of Higher Education and Ministry, P. O. Box 340007, Nashville, Tennessee 37203-0007; or [deacons@gbhem.org](mailto:deacons@gbhem.org)

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