



ANNUAL REPORT of Deacons Appointed Beyond the Bounds of the Local Church

Michigan Annual Conference

PART I

Name: _____

Business Phone: _____ Cell Phone: _____

Primary Appointment: _____

Primary Appointment Address: _____

City: _____ State: _____ Zip: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Preferred address for mailing purposes and inclusion in the journal: Home: ☐ Business: ☐

Clergy membership status: Full Connection ☐ Provisional ☐

Annual Conference: _____

Charge Conference: _____ District: _____

PART II (Attach sheet if needed)

1. If you are serving in a setting extending the witness and service of Christ in the world(¶331.1a), give the name and address of the institution or agency. Please attach your latest performance evaluation.

According to ¶331.4, deacons in full connection serving in an agency or setting beyond the local church shall relate to a local congregation. Give the name and address (including district and conference) of the local church to which you relate and serve as your second appointment.

2. If your primary field of service is in the local church, give the name and address of the local church, district and conference.

3. If you are under appointment outside the conference of which you are a member, please complete the following:

Conference where you serve: _____ Bishop: _____

District: _____ District Superintendent: _____

For affiliate charge conference membership, give the name and address (including district and conference) of the local church to which you relate.

4. Title/Position: _____

Agency/Institution: _____

Base compensation: (Year _____) \$ _____

Utilities and other housing related allowances: _____

Travel allowance: _____ Other cash allowances: _____

Please indicate your appointment category:

- ☐ a. Agency or setting beyond the local church
- ☐ b. United Methodist Church-related agency, school, college, theological school, or ecumenical agency
- ☐ c. Local congregation, charge, or cooperative parish
- ☐ d. Endorsed by the General Board of Higher Education and Ministry
- ☐ e. In service with General Board of Global Ministries

PART III (Attach additional pages if necessary)

Area of your certification, specialization, or field of service:

Have you mailed your request for annual review and renewal of certification, specialization to the appropriate agency? Yes ☐ No ☐

On Leave: ☐ First Year ☐ Second Year ☐ Third Year ☐ Fourth Year ☐ Fifth Year (§353)

Read §§328 and §329 of The Book of Discipline. Reflect, and write about the ways in which you have lived out your call to the ministry of the deacon.

According to §419 the district superintendent shall receive a report of each clergy person on his or her program of continuing education and spiritual growth. According to §350 list the ways you have fulfilled your plans for your continuing personal formation during the past year, including spiritual enrichment, service, missional, and continuing education opportunities.

According to §350 describe your plans for your continuing formation during the year ahead.

The Michigan Conference has committed itself to an anti-racist future. Share your personal work on anti-racism.

Signature: _____ Date: _____

SEND COPIES TO:

1. The Bishop
2. District Superintendent
3. Board of Ordained Ministry
4. Bishop of the area in which you serve, if other than area of which you are a member.
5. Charge Conference