2026 PROFILE OF THE CHURCH

MICHIGAN CONFERENCE OF THE UNITED METHODIST CHURCH

To be completed by Church Council/Governance Board in consultation with SPRC and Trustee/Parsonage Committee. Include in Church Conference booklet. Send electronically to the district office. Read by DS and discussed in DS/SPRC meeting. Kept in district records and used as resource for appointment-making.

CHURCH:	DISTRICT:
PASTOR:	

	Membership	Total average worship attendance (For all worship experiences per week)	Average church school attendance	Total church expenditures	Percentage of Ministry Shares paid
2026 to date					
2025					
2024					
2023					
2022					
2021					
2020					
2019					
2018					
2017					

WHAT DO THESE NUMBERS REVEAL ABOUT THE CURRENT HEALTH OF THE CONGREGATION?

The Michigan Conference equips and connects through: Christ-Centered Mission and Ministry; Bold and Effective Leaders; Vibrant Congregations and the FOUR AREAS OF MINISTRY FOCUS (Engaging in Ministry with the Poor, Improving Global Health, Developing Principled, Christian Leaders, and Creating New and Renewed Congregations).
IN LIGHT OF THESE, WHAT ARE THE CORE VALUES OF THE CONGREGATION?

HOW DO YOUR MISSION/VISION AND CORE VALUES GUIDE DECISION-MAKING AND ALIGNMENT OF MINISTRIES IN THE CHURCH? See this website, which might be a helpful resource: michiganumc.org/resources/church-vibrancy

WHAT UNIQUE QUALITIES DOES THIS CHARGE POSSESS THAT SETS IT APART?

PASTORAL MINISTRY NEEDED: DESCRIBE WHAT IS NEEDED FROM THE PASTOR (PRESENT OR FUTURE) IN EACH OF THE FOLLOWING AREAS IN ORDER TO ASSIST THE CONGREGATION TO FULFILL ITS VISION, MISSION, AND GOALS. WE MUST REMEMBER THAT WE ARE PART OF AN ITINERATE SYSTEM, SO THE FOCUS HERE IS ON THE OFFICE, NOT THE PERSON.

A. Spiritual Gifts: (Preaching, teaching, presence [How is s/he present with people especially those hurting], caring, etc.)

B. Leadership Style:

C. Worship Leadership and Preaching: (Include a description of the worship style and options your congregation provides.)

D. Pastoral Care:

E. Administration:

F. Community Involvement:

G. Academic and Career Experience Desired:

IN THE UNITED METHODIST CHURCH APPOINTMENTS ARE MADE WITHOUT REGARD TO RACE, ETHNIC ORIGIN, GENDER, MARITAL STATUS, AGE, OR DISABILITIES. HOW IS THE SPRC PREPARING THE CONGREGATION TO GENUINELY EMBRACE OPEN ITINERACY? YOU MAY BE EXPECTED AS A CONGREGATION TO PARTICIPATE IN A TRAINING EXPERIENCE REGARDING CROSS-RACIAL/CROSS-CULTURAL EXPERIENCE.

COMMUNITY DESCRIPTION: DESCRIBE COMMUNITY (URBAN, RURAL, SUBURBAN, SMALL TOWN, ETC.), GENERAL ECONOMIC SITUATION, AND EMPLOYMENT INFORMATION OF THE AREA IN WHICH THE CONGREGATION IS LOCATED.
SCHOOLS: PLEASE DESCRIBE THE PUBLIC SCHOOL SYSTEM(S) WHICH THE PASTOR'S CHILDREN MIGHT ATTEND AND/OR THE SCHOOL DISTRICT(S) THE CONGREGATION SERVES.
DEMOGRAPHICS: IDENTIFY 3 DOMINANT MOSAIC GROUPS IN YOUR CONGREGATION'S REACH (PER MISSIONINSITE)
HOW MANY NEW SMALL GROUPS WERE ESTABLISHED IN THE LAST YEAR?
HOW MANY NEW WORSHIP SERVICES WERE ORGANIZED BY THE CHURCH IN THE LAST YEAR?
WHAT GOALS HAVE BEEN SET FOR THE CONGREGATION FOR THE NEXT YEAR? THE NEXT THREE TO FIVE YEARS? HOW WILL THESE GOALS BE ACHIEVED?
PARSONAGE INFORMATION: PLEASE GIVE ADDRESS AND WHO OCCUPIES THIS HOUSE.
NUMBER OF BEDROOMS? BATHROOMS? SQUARE FOOTAGE?
IS THERE A FAMILY ROOM? STUDY?
GENERAL CONDITION OF HOUSE?
ANNUAL REVIEW OF HOUSE MADE ON WHAT DATE? ACTION REQUIRED ON?

CHURCH STAFF: LIST THE POSITIONS OF PAID STAFF (¶258.2.g(12) *2016 Book of Discipline*) OTHER THAN THE PASTOR. THE PASTOR'S SALARY INFORMATION IS FOUND ON THE COMPENSATION RECOMMENDATION FORM.

NAME	POSITION	HOURS/ WEEK WORK	SALARY/ HOURLY RATE	BENEFITS*	TOTAL SALARY/ WAGES
			$	$	$
			$	$	$
			$	$	$
			$	$	$

List additional paid staff on a separate sheet of paper.
*Benefits may include: Hospitalization and Medical Expense Program; Pension; Continuing education; Travel expenses; and Other.

PROTECTION POLICY

Does your church have a protection policy? *(Enter Yes or No in box below.)*	**Is the most recent copy on file with the district office?** *(Enter Yes or No in box below.)*	**When was your church protection policy last reviewed?** *(Enter date in XX/XX/XXXX in box below.)*	**When was the last training held for your church on your protection policy?** *(Enter date in XX/XX/XXXX in box below.)*

Is your church leadership in Brick River up to date?	YES ☐ or NO ☐
Are the worship times accurate in Brick River?	YES ☐ or NO ☐
Is your church website accurate in Find A Church (if applicable)? www.umc.org/en/find-a-church	YES ☐ or NO ☐
Does the church offer online worship?	YES ☐ or NO ☐
Are you an EngageMI congregation? michiganumc.org/engage-mi	YES ☐ or NO ☐

WHAT ARE THE 2-4 MAJOR AREA OF MISSION FOCUS FOR YOUR CONGREGATION AND BRIEFLY DESCRIBE EACH?

WITH WHOM DO YOU PARTNER TO ACHIEVE EACH MISSION FOCUS LISTED ABOVE?

SIGNATURE AND DATE	**SIGNATURE AND DATE**
PASTOR:	CHURCH COUNCIL/GOVERANCE BOARD CHAIR:
DATE:	DATE: