

Local Pastors' District File Content Checklist

Date File Begun: _____

Name _____

Address _____

Phone (with area code) _____ email address: _____

Current Appointment (charge) _____

Date of Appointment: _____

Status _____ Full time _____ Part time _____

_____ Not currently appointed (Credentials to be returned)

Certified as a Candidate (§315.2a) Date _____

Local Pastor's Licensing School completed and faculty evaluation and recommendation received (§315.2b)

Date Completed _____ School Location _____

or

Completed 1/3 of MDiv Degree (§315.2b)

Seminary _____

_____ Application for Clergy Relationship to the annual conference (form 105)

_____ Examined by the dCOM (§315.2c) Date _____

_____ Approved by BOM (§315.5d) Date _____

_____ BOM Candidacy Registrar notified of LP status Date _____

_____ Course of Study Completed (indicated if by correspondence)

1st Year _____ 1st Year Advanced _____

2nd Year _____ 2nd Year Advanced _____

3rd Year _____ 3rd Year Advanced _____

4th Year _____ 4th Year Advanced _____

5th Year _____ 5th Year Advanced _____

LP License renewed (must be renewed annually)

Dates _____

Credentials (must be returned if no longer appointed)

BOM Handbook, Chapter 2, The District Committee on Ordained Ministry, 2009