

Annual Report of the Mentor to the Iroquois River District Committee on Ordained Ministry

To be submitted by postal mail to the registrar by due date listed on the Candidate's notice to interview letter

Date: _____ For the period: of _____ to _____

Name of Candidate: _____

Address: _____ Telephone: _____

E-Mail: _____

Current Appointment: _____

Status _____ Certified Candidate for Elder _____ Probationary Member
_____ Certified Candidate for Deacon _____ Other Denomination
_____ Licensed Local Pastor

Name of Candidacy Mentor: _____

Address: _____ Telephone: _____

District: _____ E-Mail: _____

Appointment: _____

1. How many times have you met this year? (Four times should be the minimum and up to six meetings are advised. This applies to face-to-face meetings only.)

2. What ministerial functions and activities have you observed?

_____ Preaching _____ Pastoral Calling
_____ Liturgy _____ District or Conference Activities
_____ Board or Committee Meeting _____ Other (please list)

3. What progress has been made in completing the psychological assessment process? (If applicable)

