



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):



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URL gbhem.org
ADDRESS 1001 19th Avenue, South
Nashville, TN 37212

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

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