

THE UNITED METHODIST CHURCH

Local Pastor's District File Content Checklist

Name:						
Addres	s:					
City:	State:		ZIP:			
Phone:	Email:		Date file started:			
Current	appointment (charge):					
Date of	appointment:					
Status:	—— Full time —— Not currently appoint	——— Part time red (License to be returned	Student			
	Certified as a candidate (¶315.2a)	Date:				
	Completed Orientation to Ministry (¶315.2b)				
	Local pastor's licensing school completed and faculty evaluation and recommendation received (¶315.2c) Date competed: School location:					
	Or					
	Completed 1/3 of M. Div. degree (¶315.2c)					
	Seminary					
Application for Clergy relationship to the annual conference (form 105)						
	Examined by the dCOM (¶315.2d)	Date:				
	Approved by BOM (¶315.6b)	Date:				
	BOM registrar notified of LP status	Date:				
	Course of Study completed					
	1 st year	1 st year advanced				
	2 nd year	2 nd year advanced				
	3 rd year	3 rd year advanced				



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	4 th year	4 th year advanced——	
	5 th year		
	License for pastoral ministry renewed (must be renewed annually)		
	Dates —		
		-	
Licens	se must be returned if no long	ger appointed	