

## Annual Report 2023: Local Pastors

Name					
	(first name)		(last name)	(middle name)	
Addre	ess				
City _			State	Zip	
Email	l		Phone		
Date o	of Birth	Marital Status	: Single Married N	umber of Children	
Name	of Church/Charge You	are Currently Serving			
Distric	ct				
1.	Please check your pre	esent category: 🗌 F	ull-time FL 🛛 🗌 Part-time F	ΡL	
2.	Describe your secular	employment if servin	g as a Part-time Local Pastor.		
3.	Local Pastor's License	2	Date Issue	d	
4.	Are you attending or have you attended college? Yes No				
ч.	College				
	College				
	Number of Credit Hou	urs (Semester)	Completed	? Yes No	
5.	Are you attending or have you attended seminary? See No				
	Seminary				
	-				
	Number of Hours Con	npieted			
Re	cord of progress in Min	isterial Course of Stud	ly School:		
	First Year	_ Fourth Year			
	Second Year	Fifth Year			
	Third Year	Completed	Date		
	Indicate with an asteri	sk if by correspondend	ce.		



Where will you be atte (Required of Full-Time &	nding in 2024? Part-Time Local Pastors)			
Other				
ord of Appointments:				
Dates	Place	District		
Dates	Place	District		
What is your request for Annual Conference, June 2024?				
Appointment as Fu				
Appointment as Pa				
Appointment as Pr				
Appointment as As				
	her			

Interview Request (AM, PE, PD, FD, or FE), your stated race and gender. Your BOM Interview team will be representative of the West Ohio Conference. Are there other considerations that might be helpful for you on your Interview Team?

**Please note:** We cannot guarantee your preference, but we will do our best to accommodate your request when assembling your Team.

7. We will use every measure available to keep everyone safe for Interviews in Winter 2024. If it safe to meet in person, we will plan for it. If the COVID Alert levels are high or increasing, what is your preferred Interview format?

Virtual (Zoom)

In Person, socially distanced with masks

8. Use the back of this sheet to describe your personal/professional progress this year.

