PLEASE HAVE YOUR LEAD PASTOR COMPLETE AND MAIL/EMAIL THIS FORM

PASTOR'S EVALUATION OF CANDIDATE

South Central Ohio District

Candidate:
Church:
Lead Pastor:
Please provide a brief assessment of this candidate's involvement in ministry in your local church throughout the past church year. Please list any characteristics, interests, concerns, etc. that may be of significance to the Credentials Board as we guide this individual toward future ministry. This is confidential and will not be shared with the candidate.
To assist the credentials board in determining the ordination service component prerequisite, please answer the following:
Does this person serve as official pastoral staff member at your local church, in accordance with Manual 169.1, 169.2? yes no
If yes: Title:
Date of Hire: Total Years/Months Served in this position:
I understand my typed name constitutes a legal signature confirming that I acknowledge and agree to
the above statements and the validity of information I have provided.
Signature/Typed Name: Date: