



West Ohio Conference

Request for Approval of Extension Ministry Appointment

Part I: Biographical Information

Name: _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Home Work Cell E-mail _____

FULL (or) PROVISIONAL member (or) ASSOCIATE member (or) LOCAL PASTOR

Charge Conference Membership _____ District _____

Part II: District Superintendent Conversation

A conversation with your current District Superintendent is necessary for a new appointment request.

Name of DS: _____

Date of conversation with DS ____ / ____ / ____

Notes:

Part III: Appointment Request Information

Name of Ministry Setting _____

Address _____

City _____ State _____ Zip _____

Title/Position _____

Terms of Service Full time $\frac{3}{4}$ $\frac{1}{2}$ $\frac{1}{4}$

Effective Date of Service ____ / ____ / ____

Base compensation (yearly) _____ Other _____

Utilities & Other Housing Related Allowances _____

Supervising person or board: _____ Title: _____

If board, name of chair: _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Home Work Cell E-mail _____



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Part III: Appointment Request Information Continued

Please Indicate Your Appointment Category (§ 344.1):

- Appointed within the Connectional Structure
- Endorsed by UM Endorsing Agency Within the General Board of Higher Education and Ministry
- In Service with General Board of Global Ministries
- Appointed to Other Valid Approved Extension Ministry

Part IV: (please type responses below and attach supporting documents)

- Explain the mission and purpose of the church or agency?

- Provide a brief description of the ministry.

- Describe the structure to which you will be accountable.

- Describe the ways **clergy** “establishes a clear distinction between the work to which all Christians are called and the work for which Clergy are appropriately prepared and authorized” (BOD 344.1).

- Name the reason(s) the church or agency needs a **clergy** to serve on its behalf.

- In this setting, describe how the **clergy** will serve the missional needs of the church and fulfill their Licensing or ordination to be a Minister of Service, Word, Sacrament, and Order.

- Evidence of continuing education and spiritual growth in the past year.



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Please Attach a job description, agency policy manual (if applicable) and any other relevant material.

Clergy Signature _____ Date ____/____/____

Send completed paperwork to:

Office of Ministry

32 Wesley Blvd.

Worthington, Ohio 43085

614-844-6200

For Board of Ministry Use:

Date Reviewed by Board of Ministry ____/____/____

Notes: