

# West Ohio Conference Form for Certified Lay Minister Requirements for Certification Renewal

## *Personal Information*

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Candidate's Name: \_\_\_\_\_  Male  Female

*(as it will appear on certificate)*

Ethnicity:  African American  Asian/Pacific Islander  Caucasian/European  
 Multi Cultural/Global  Native American  Spanish/Hispanic/Latino

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_  Home  Work  Cell E-mail \_\_\_\_\_

District  Capitol Area North  Capitol Area South  Maumee Watershed  Foothills  
 Miami Valley  Northwest Plains  Ohio River Valley  Shawnee Valley

Name of Church \_\_\_\_\_

Church Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Church Phone: \_\_\_\_\_ Pastor Name: \_\_\_\_\_

## *Certified Lay Minister Requirements*

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Initial Certification Date Issued: \_\_\_\_\_

Last Certification Renewal Date Issued: \_\_\_\_\_

Continuing Education:

Advanced Lay Ministry Course(s) completed within the last two years supporting mutual ministry plan

Course Title: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Course Title: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Additional Training(s)

Course Title: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Course Title: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Interview with District Committee on Ordained Ministries Interview Date: \_\_\_\_\_

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## *Signatures*

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Candidate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

District Chair on Ordained Ministry Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## *Submit*

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- Completed Form
- Updated Mutual Ministry Plan

Mail to: West Ohio Conference  
Sam Rodriguez  
32 Wesley Blvd., Worthington, Ohio 43085

or email: [srodriguez@wocumc.org](mailto:srodriguez@wocumc.org)

### West Ohio Conference Committee on Servant Lay Ministries Office Only

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Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Certification renewal approved as a Certified Lay Minister by the West Ohio Conference Director of Connectional Ministries:  Yes  No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Certificate Issued Date: \_\_\_\_\_

West Ohio Conference Director of Connectional Ministries Signature: