

Pastoral Self-Profile Form

Contact Information:

Your Name: _____

Email: _____

Current Church: _____

District: _____

Address: _____

Mobile Phone: _____

Office Phone: _____

Questionnaire *(enter answer below question)*

What is your reason for seeking a new appointment currently?

Describe your faith journey with Christ.

What are your gifts/strengths for ministry?

Describe your leadership style.

What are your growing edges in ministry?

What are the ministry areas about which you are passionate?

Describe your preaching style.

Describe how you are engaged in a ministry of outreach with your congregation?

Describe your style of relating to people.

How are you leading your congregation in the area of stewardship and connectional giving (apportionments)?

What assessments have you taken (Myers-Briggs, Strengths Finder, DISC, etc.) and what did the results show?

What vision for ministry are you sharing with your current congregation?

How are you leading the congregation into that vision?

What has been your greatest challenge at your current appointment?

What kind of setting would you most enjoy serving in?

What do you do for self-care?

Signature (enter full name): _____

Date: _____

Note: By entering your full name and the date, you agree that you have electronically signed this document. Please keep a copy for your record.

Return the completed form to Jill Philipp, Cabinet Administrative Coordinator at jphilipp@wocumc.org.