

SHENANDOAH DISTRICT

APPLICATION FOR REAPPOINTMENT AS LAY
SUPPLY PASTOR OF AN ESTABLISHED CHURCH



LAST NAME	FIRST NAME	MN
CHURCH		FOR CHURCH YEAR 2026-2027

INSTRUCTIONS: If you desire to expand on any of your answers, please go to "Additional Remarks" at the end of this form and write/type your comments there. Be sure to begin your comments with, "Regarding No. 1" or whatever the number of the question might be.

A. MINISTRY

1. Do you believe your ministry will be fruitful in the upcoming year?

Yes No

Please describe briefly.

B. CHURCH INFORMATION

2. In what ways do you see your church growing/progressing/moving forward in the coming year?

3. Has the USF/EIF (Budget Assessment) obligation been paid in full this past year?

Yes No

4. If you answered "No" to Number 3 above, have you discussed with your local board of administration a possible plan to correct that in this new year?

Yes No

Please briefly describe your plan.

B. PERSONAL RESPONSIBILITIES

5. Please provide the name of the Wesleyan approved coach who is currently serving as your coach.

6. Have you submitted all required reports promptly this year?

Yes

No

7. When did you last receive a raise in pay/benefits from your local church?.

C. LEGAL ACCOUNTABILITES

8. Is it your desire to be reappointed as pastor to your local church for the coming year?

Yes

No

If No, please explain.

9. Will you confirm that a proposed budget will be submitted to your local board of administration for approval for the coming year?

Yes

No

If No, please explain.

10. Have you set goals for the coming year in Conversions, Baptisms, and Worship Attendance?

Yes

No

If Yes, please list those goals. If No, please give reasons why.

SIGNATURE

Please sign in ink. Electronic submission constitutes signature.

ADDITIONAL REMARKS

Use this space to register all added comments.

Be sure to number your comments to correspond with the number of the question upon which you are giving more information.

Regarding No. ____ :

What ideas or suggestions do you have for the district leadership to consider?

Please return completed form to:
Shenandoah District Center, PO Box 7165, Roanoke, VA 24019
Email: dc@shenandoahdistrict.ws

WHEN YOU HAVE COMPLETED THIS DOCUMENT, BE SURE TO PRINT AND SAVE A COPY FOR YOUR RECORDS.