

List of Persons to prepare Recommendations/Evaluations PM 2017

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Names and contact information of those to receive a request to complete a recommendation on your behalf via e-mail. All individuals should be notified by candidate that they will be receiving a request via e-mail to complete a recommendation/evaluation survey on your behalf. You may add additional references in the comment section at the end of the survey.

*** 1. Candidate Name and Contact Information:**

Name:	<input type="text"/>
Address:	<input type="text"/>
Address 2:	<input type="text"/>
City/Town:	<input type="text"/>
State:	<input type="text" value="-- select state --"/>
ZIP:	<input type="text"/>
Email Address:	<input type="text"/>
Phone Number:	<input type="text"/>

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Names and contact information for Recommendations/Evaluations:

*** 2. District Superintendent of the district where you are serving, or if not serving a church at this time, the District Superintendent of the district from which you received DCOM recommendation. Note: If you have a new DS, please list your previous DS in question 3 below.**

Name:	<input type="text"/>
Email Address:	<input type="text"/>
Phone Number:	<input type="text"/>

3. If your Response to the note in question 2 above was in the affirmative, please list the name and contact information for your previous District Superintendent.

Name:

Email Address:

Phone Number:

* 4. Candidacy Mentor

Name:

Email Address:

Phone Number:

* 5. The pastor of the church where you hold your membership

Name:

Church

Email Address:

Phone Number:

* 6. Chairperson of the Staff Parish Relations Committee of the charge/church you are serving, or of the church recommending you if you are not under appointment.

Note: If you have just begun a new appointment, in addition to the above, please list your previous appointment's SPRC chair, or if not previously under appointment, from the SPRC Chair of the church where you hold your membership in Question 7 below.

Name:

Church:

Email Address:

Phone Number:

7. If your response to the note in question 6 above was in the affirmative, please list the contact information from your previous appointment's SPRC Chair, or if not previously under appointment, list the name and contact information for the SPRC Chair of the church where you hold your membership.

Name:

Church:

Email Address:

Phone Number:

* 8. One other United Methodist lay person in a leadership position who is able to comment on your qualifications for Annual Conference membership and commissioning.

Name:

Church:

Email Address:

Phone Number:

* 9. Other:

If you are serving on the staff of a church, list the contact information for the Senior Pastor of the church. If you are serving in ministry outside the local church, list the contact information for your supervisor. All others, please select a person who has observed you in ministry and sits in a position of leadership within the church/ministry setting.

Name:

Position:

Email Address:

Phone Number:

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Seminary Evaluations

* 10. A full-time seminary professor who is capable of giving an in-depth evaluation. (In most cases, this should be your faculty advisor.)

Name:

Seminary:

Email Address:

Phone Number:

* 11. Your preaching professor who should comment specifically on your preaching abilities.

Name:

Seminary:

Email Address:

Phone Number:

* 12. The Director of the Field Education Office if you had such an assignment or the person who served as your on-site supervisor during your Field Education assignment (PM&M or equivalent) or your supervisor of Clinical Pastoral Education (CPE).

Name:

Seminary/Supervisor

Email Address:

Phone Number:

13. Comments: You can list any additional references in this comment section and they will be included in the reference survey.