

June 18, 2009

To Candidates Eligible for Change of Relationship at Annual Conference 2010

From: Coordinator of Clergy Services  
Board of Ordained Ministry, SC Conference

RE: Application Process and Requirements under the Discipline and BOM Policy.

1. The goal of Clergy Services is to assist your application process for a change in conference relations. Please read carefully the Discipline paragraphs applicable to your request. Additional requirements are noted in the updated BOM Policy Guidelines used by your District Committee. BOM Policy may be viewed online at [www.umcsc.org](http://www.umcsc.org), under "Candidate Forms".
2. Review the current **Check List** of the minimum eligibility requirements related to your request. Be sure you are eligible under the Discipline and BOM Policy.
3. Complete and return the enclosed **Application for Clergy Relationship (F105)**, if not previously submitted; and sign/return **Verification of Packet Contents**. The written requirements and all other forms must be submitted by indicated **due date** or earlier.
4. Your prompt and careful response to written and verbal requests related to this process is an essential part of the process. Timely response will be considered in making the decision on your readiness and/or effectiveness for membership in the SC Annual Conference.
5. Please note that the required psychological testing process involves your Consent Letter signed in the district Superintendent's office. If not previously tested, you are responsible to schedule a day for testing with Ministry Development Services of PSCC, 5203 Sharon Road, Charlotte, NC 28210, Phone 704-554-9222, FAX 704-554-9956.

If you have questions, please call 1-888-678-6272 or email [clergyservices@umcsc.org](mailto:clergyservices@umcsc.org)

Enc: Check List of Minimum Requirements  
Forms  
Instructions on Sermon, Discipline Questions, Bible Study

# VERIFICATION OF PACKET CONTENTS

AM2010

THIS FORM SHOULD BE SIGNED AND RETURNED IMMEDIATELY TO:

Clergy Services  
4908 Colonial Dr., Suite 122  
Columbia, SC 29203

THIS IS TO ACKNOWLEDGE RECEIPT IN THE ORIENTATION PACKET OF THE FOLLOWING:

## ASSOCIATE MEMBER (AM)

1. Letter: Candidate Eligible for Change of Relationship at Annual Conference
2. Verification of Packet Contents
3. F102 Biographical Information Form (attach your photo – approximately 2x2)
4. F103 Medical Report of Ministerial Candidate
5. **01SCBOM** Action Report to the BOM Registrar (Clergy Services)\*
6. **05SCBOM** Annual Report of District Superintendent\*
7. **06SCBOM** Authorization to Allow Determination of Credit Worthiness
8. **07SCBOM** Notarized Criminal Background Statement
9. **08bSCBOM** Annual Clergy Mentor Report
10. General Instructions for Associate Membership
11. Sermon Instructions
12. Disciplinary Questions Part I and Part II
13. Bible Study Instructions
14. **13SCBOM** Policies and Procedures for Academic Style and Intellectual Integrity
15. 2010Timeline/Checklist

(\* **Asterisk:** indicates items submitted by others, but your follow-up is essential)

**THIS IS TO ACKNOWLEDGE that it is my responsibility to complete and return my response to the Office of Clergy Services.** This includes the items noted on the Verification of Packet Contents. In addition the following shall be submitted by due date.

1. \*College Transcript showing completion of a minimum of **60 semester hours for AB** degree
2. \*Transcript showing completion of at least **FIVE YEAR Course of Study** and LP Studies
3. Psychological assessment (Consent Letter in DS Office) and scheduled with Ministry Development Services of PSCC, 5203 Sharon Road, Charlotte, NC 28210, Phone 704-554-9222, FAX 704-554-9956

I understand the first submission of these materials from me shall be postmarked by **October 23**. Failure to meet this deadline may result in my application for **ASSOCIATE MEMBER** not being considered by the Board of Ordained Ministry, unless an exception is granted by the Board for acceptable reasons.

Signature: \_\_\_\_\_

Name (Typed or Printed) \_\_\_\_\_ Date: \_\_\_\_\_

AM09

**THE UNITED METHODIST CHURCH  
BIOGRAPHICAL INFORMATION FORM**

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_ SSN: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ School of Office Phone: ( ) \_\_\_\_\_

Birth Date: \_\_\_\_\_ Sex: M \_\_\_\_\_; F \_\_\_\_\_

Ethnic Origin: Asian; \_\_\_; African American/Black \_\_\_; Native American \_\_\_;  
Pacific Islander \_\_\_\_\_; White \_\_\_\_\_

Local Church: \_\_\_\_\_ City: \_\_\_\_\_

Conference: \_\_\_\_\_ District: \_\_\_\_\_

Briefly describe your involvement in your local church, such as leadership positions, groups you enjoy, church activities, etc.

Describe your church involvement in your local church, such as district or annual conference work, church camps, workshops, outreach, etc.

Your Educational Background:                      Dates Attended:    Degree or Credit Hours

High School: \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

College: \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Graduate School: \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Theological Seminary: \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

**or**

Courses of Study for Ordained Ministry Yr. 1 \_\_\_; Yr. 2 \_\_\_; Yr. 3 \_\_\_; Yr. 4 \_\_\_; Yr. 5 \_\_\_

Advanced Course Study:                      Semester Hours Credit \_\_\_\_\_

Marital Status: Single, never married \_\_\_\_\_;                      Married, in first marriage \_\_\_\_\_;

Married in second or more \_\_\_\_\_;                      Widowed \_\_\_\_\_;

Separated \_\_\_\_\_;                      Divorced \_\_\_\_\_

If married, spouse's name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_

Your Children, if any:

Name of Child:                      Date of Birth:                      Sex:                      Education:

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

WEB 2009

continued on back    Form 102a

Dependents other than your spouse and children:

Name:                      Date of Birth:                      Sex:                      Education:

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

Describe your community involvement and volunteer work, such as participation in community organizations, social clubs, service agencies, and other non-church-related volunteer service:

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Your childhood family and other significant relatives:

Name:	Relation:	Age:	Sex:	Education:	Marital Status:	Occupation
	Father	_____	_____	_____	_____	_____
	Mother	_____	_____	_____	_____	_____
		_____	_____	_____	_____	_____
		_____	_____	_____	_____	_____
		_____	_____	_____	_____	_____

Your work experience, such as current employment, previous employment, and military experience, if any:

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Have you served as a local pastor, diaconal minister, deacon or elder in The United Methodist Church? \_\_\_\_\_  
Conference? \_\_\_\_\_

**Conference Relationship (Indicate Date)**

Consecrated Diaconal Minister \_\_\_\_\_  
Licensed as a Local Pastor \_\_\_\_\_  
Associate Member \_\_\_\_\_  
Probationary Member \_\_\_\_\_  
Deacon in Full Connection \_\_\_\_\_  
Elder in Full Connection \_\_\_\_\_

Have you had a change in clergy relationship with a conference of The United Methodist Church? \_\_\_\_\_  
Conference? \_\_\_\_\_

**Change in Conference Relationship (Indicate Date)**

Discontinuance \_\_\_\_\_  
Leave of Absence \_\_\_\_\_  
Incapacity Leave \_\_\_\_\_  
Location \_\_\_\_\_  
Retirement \_\_\_\_\_  
Withdrawal \_\_\_\_\_  
Termination by action of the annual conference \_\_\_\_\_



**PART II: MEDICAL EXAMINER'S REPORT**

*To be completed by the physician*

Patients Name \_\_\_\_\_

1. General Appearance : \_\_\_\_\_

2. Personal Hygiene: \_\_\_\_\_

3. Height: \_\_\_\_\_ Weight: \_\_\_\_\_

4. Temperature \_\_\_\_\_ Pulse: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ (Give readings before  
Temperature \_\_\_\_\_ Pulse: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_ and after exercise)

5. Vision: \_\_\_\_\_

6. Hearing: \_\_\_\_\_

7. Condition of mouth and throat: \_\_\_\_\_

Pharynx: \_\_\_\_\_ Tonsils: \_\_\_\_\_

Mucous membranes: \_\_\_\_\_ Teeth: \_\_\_\_\_

Tongue: \_\_\_\_\_ Gum: \_\_\_\_\_

8. Evidence of goiter, enlarged glands, or other tumors: \_\_\_\_\_

9. Evidence of varicosity: \_\_\_\_\_ Hernia: \_\_\_\_\_

10. Evidence of disease or abnormalities of : Heart: \_\_\_\_\_

Lungs: \_\_\_\_\_

Thorax: \_\_\_\_\_

Spine: \_\_\_\_\_

Genitalia: \_\_\_\_\_

11. Evaluate nervous and mental condition: \_\_\_\_\_

Laboratory Tests (Required) Pap smear (all women) \_\_\_\_\_ Mammogram (all women) \_\_\_\_\_

Fasting Blood Sugar \_\_\_\_\_ PSA (for men over 50) \_\_\_\_\_ Cholesterol \_\_\_\_\_

**SUMMARY OF FINDINGS AND RECOMMENDATIONS**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of physician: (Type or Print Name) \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Street City State Zip

Signature of physician: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICIAL FORM FROM DIVISION OF ORDAINED MINISTRY, GBHEM**

**District Committee on Ordained Ministry**  
Action Report to the BOM Registrar (Clergy Services)

District \_\_\_\_\_ Date \_\_\_\_\_

Full Name of Candidate \_\_\_\_\_ Current Status \_\_\_\_\_

Candidate's Address \_\_\_\_\_

The district Committee on Ordained Ministry took the following action(s) regarding the person listed above. Check the appropriate action(s). All votes require ¾ majority approval.

\_\_\_\_\_ **DCOM has reviewed Medical, Criminal Background, Credit, and Psychological Results. DS initial \_\_\_\_\_**

\_\_\_\_\_ Granted certified candidate status according to ¶311

\_\_\_\_\_ Recommended (continuation) as certified candidate (¶312)

\_\_\_\_\_ Certified as having completed the studies for licensing as a local pastor, to be listed as eligible for appointment, may be awarded the license as a local pastor when and if appointed to a local parish (¶316)

\_\_\_\_\_ Recommended to the BOM for continued eligibility for appointment as a **local pastor** (¶319)

\_\_\_\_\_ Recommended for election to provisional membership toward **deacon's** orders (¶324)

\_\_\_\_\_ Recommended for election to provisional membership toward **elder's** orders (¶324)

\_\_\_\_\_ Recommended for **associate membership** (¶321)

\_\_\_\_\_ Annual Meeting with PE \_\_\_\_\_ or PD \_\_\_\_\_ (Complete & attach form 04SCBOM)

\_\_\_\_\_ Recommended for Transition from Full Deacon to Full Elder \_\_\_\_\_ or Full Elder to Full Deacon \_\_\_\_\_

\_\_\_\_\_ Recommended for Transition from Provisional Deacon to Provisional Elder \_\_\_\_\_ or PE to PD \_\_\_\_\_

Recommended for **readmission** to conference relationship:

\_\_\_\_\_ Readmission to provisional membership (¶363)

\_\_\_\_\_ Readmission after honorable or administrative location (¶364)

\_\_\_\_\_ Readmission after exit of ministerial office (¶365)

Persons who are awarded the **license** as a local pastor, or who are continued in that status must be classified as one of the following (If licensed, please check appropriate designation): ¶318

\_\_\_\_\_ Full-Time Local Pastor \_\_\_\_\_ Indicate progress in studies \_\_\_\_\_

\_\_\_\_\_ Part-Time Local Pastor \_\_\_\_\_

\_\_\_\_\_ Student Local Pastor \_\_\_\_\_

\_\_\_\_\_ **Discontinue from Status as** \_\_\_\_\_

\_\_\_\_\_ **Other** \_\_\_\_\_

Signature of dCOM Chair or Registrar \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

**ANNUAL REPORT OF DISTRICT SUPERINTENDENT**

**On Provisional Member Seeking Full Membership**

Reference: 2008 Book of Discipline Pars.330.1, 335;

CANDIDATE'S NAME \_\_\_\_\_ **Deacon Elder**  
(Circle one)

PRESENT APPOINTMENT: District \_\_\_\_\_ Charge \_\_\_\_\_

Date appointed: \_\_\_\_\_

PERIOD OF SUPERVISION: PE/PD/AM Report for **YEAR 1 2 3** (circle one)

Ministerial Standards: Observed by the District Superintendent

1. Candidate's Commitment to itinerancy \_\_\_\_\_
2. Relationship to other ministers/parsonage families \_\_\_\_\_
3. Moral Character/ Life Style \_\_\_\_\_
4. Soundness of Doctrinal Stance \_\_\_\_\_
5. Maturity/Emotional Stability \_\_\_\_\_
6. Attitude toward UMC \_\_\_\_\_
7. Relational Skills \_\_\_\_\_
8. Work Habits \_\_\_\_\_

**FULFILLMENT OF DUTIES: Pastor or Place of Service (Para. 328-336 2008 Discipline)**

(DS is asked to briefly comment on any of the listed duties of a pastor where there is a special concern. Use the back of this sheet, if necessary.)

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Response from the Provisional Member to the above report by the DS:

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Dated \_\_\_\_\_ DS Signed \_\_\_\_\_

Date Report Completed \_\_\_\_\_ PE/PD/AM Signed \_\_\_\_\_

Revised WEB 2009

05SCBOM

Copy distribution:

DS Office File

Clergy Services, 4908 Colonial Drive, Suite 122, Columbia, SC 29203 - **DUE from DS by Feb. 1**

**AUTHORIZATION TO ALLOW DETERMINATION OF CREDIT WORTHINESS**

I, \_\_\_\_\_ hereby authorize THE BOARD OF ORDAINED MINISTRY OF THE SOUTH CAROLINA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH (“The Board”) to investigate my credit worthiness, particularly in relation to extensions of credit as listed below. The undersigned applicant warrants that the following information is true, correct and complete, and that it may be relied upon by The Board in recommending me for a change in Conference relationship and/or by the Conference. I hereby authorize The Board to obtain from employees of any source such information as may be desired in connection with this application, and authorize such sources(s) to provide the same. A copy of this authorization shall be as valid as the original.

\_\_\_\_\_ Date

\_\_\_\_\_ (SIGNATURE OF APPLICANT)

Full Name & Address Of each Creditor or Account Opened	Date Credit/ Loan Granted	Purpose of Loan or Account	Current Balance	Monthly Payments	Payments Up to Date? YES / NO
1.					
2.					
3.					
4.					
5.					
6.					
7.					

IF ANY OF THESE ACCOUNTS ARE NOT CURRENT, LIST BELOW THE ACCOUNT AND THE AMOUNT PAST DUE, AND WHAT ARRANGEMENTS HAVE YOU MADE TO BRING THE ACCOUNTS UP TO DATE?  
 (Continue on back of form, if needed)

**SOUTH CAROLINA ANNUAL CONFERENCE BOARD OF ORDAINED MINISTRY  
NOTARIZED CRIMINAL BACKGROUND STATEMENT**

Please Print or type this form

Full Name: \_\_\_\_\_

Street Address \_\_\_\_\_  
\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_ Yes \_\_\_\_ No.

Have you ever been accused of a felony? \_\_\_\_ Yes \_\_\_\_ No.

If "Yes" state in detail the nature of the conviction or accusation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a misdemeanor? \_\_\_\_ Yes \_\_\_\_ No.

Have you ever been accused of a misdemeanor? \_\_\_\_ Yes \_\_\_\_ No.

If "Yes", please state in detail the nature of the conviction or accusation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of sexual misconduct? \_\_\_\_ Yes \_\_\_\_ No.

Have you ever been accused of sexual misconduct? \_\_\_\_ Yes \_\_\_\_ No.

If "Yes", please state in detail the nature of the conviction or accusation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_, Affirm that all the information provided by me on this form is true, correct and accurate.

I understand that if false information has been given, my application process for the ASSOCIATE MEMBERSHIP in the South Carolina Annual Conference of the United Methodist Church will be terminated, and I will be subject to any disciplinary actions as set forth by said Annual Conference. By signing this I further grant permission for The Board of Ordained Ministry to conduct Criminal Background Investigations with all appropriate agencies.

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

**Notary Public Signature & Seal**

State of South Carolina, County of \_\_\_\_\_

Sworn before me on this \_\_\_\_\_

\_\_\_\_\_  
Notary Public of The State of South Carolina

My commission expires \_\_\_\_\_

Please Send this form and the remittance fee **(\$35.00)** payable to SC Conference Treasurer to:  
Office of Clergy Services, 4908 Colonial Drive ,Columbia, SC 29203

Copy distribution: DS Office File  
(DS mails original with seals to Clergy Services, 4908 Colonial Drive, Columbia, SC 29203)  
07SCBOM

# ANNUAL CLERGY MENTOR REPORT

(For Period **September 1 to June 1**)

South Carolina Conference Board of Ordained Ministry

Due Annually to the Superintendent by **June 15**

Report for Mentee: \_\_\_\_\_

Appointed Local Pastor:

Provisional:

Current Status : **FL** (Full-time 4COS) - Par. 343 \_\_\_\_\_  
(Check ONE) **PL** (Part-time 2COS) - Par. 343 \_\_\_\_\_

**PD** (MA or MDV)- Par. 315 \_\_\_\_\_  
**PE** (MDV) - Par.315 \_\_\_\_\_

Address \_\_\_\_\_

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

Mentor Assigned : \_\_\_\_\_ Date: \_\_\_\_\_ Number of Years: \_\_\_\_\_

## Date of Sessions

The Board of Ordained Ministry recommends **nine sessions**/contact hours per year with Candidate.

(For Provisional Candidates fewer sessions may be required. **Residency I will assign Mentors for PD & PE. DS Office recommends Clergy Mentor for appointed FL, PL, SP**)

Dates of Sessions: \_\_\_\_\_

Report Development Process: (Record Report details on **BACK OF THIS SHEET**)

(Base Report on your agreed upon **Mentee/Mentor Covenant**)

- The **Mentee writes a first draft** of the report.
- The mentor reviews the report and makes amendments, if needed.
- The mentor and Mentee sign the report and keep a file copy
- The Mentee shall be responsible for sending the jointly signed report to the district office

**Basic principle:** The Mentee will sign off on the report last and submit the report to the district office.

\_\_\_\_\_  
Signature of Mentor

\_\_\_\_\_  
Date Completed

\_\_\_\_\_  
Signature of Mentee being counseled

\_\_\_\_\_  
Signature of District Superintendent

\_\_\_\_\_  
Date Received

\_\_\_\_\_  
District Office

Clergy Mentors/Mentees are assigned by August 15 for the year (**September 1 to June 1**). The dCOM and District Superintendent review Mentor/Mentee Reports. Board of Ordained Ministry in the Clergy Services Office reviews these Reports. Note: In a year when the Mentee candidate or Mentor move out of the district, the reports are for the period **September 1 to June 1**, and the report is **due to the NEW DS** of the candidate by June 15. (Mentors/Mentees may make copies of form as needed.)

District Registrar: \_\_\_\_\_

Revised 2009

08bSCBOM

Copy distribution: DS Office

(DS mails copy to: Clergy Services, 4908 Colonial Drive, Columbia, SC 29203)

**GENERAL INSTRUCTIONS FOR ASSOCIATE MEMBERSHIP**  
**SCBOM APPLICATION PROCESS FOR ASSOCIATE MEMBERSHIP AM**

(Under Par. 321-332, 2004 Discipline)

1. Find the VERIFICATION OF PACKET CONTENTS form. Fill it out **TODAY and return** it to:  
Clergy Services, 4908 Colonial Dr, Suite 122, Columbia, SC 29203
2. Study these instructions carefully. Call, if you have questions after reading the instructions. The **Office of Clergy Services** is to receive all submitted materials on **behalf of the Board Registrar**.

General Guidelines

1. Type your FULL NAME, address and phone number on each item submitted. Type your **name only** at the top right of each page to help the committees easily identify your work.
  2. Keep a copy of each item submitted for your file.
  3. **TYPED** materials are preferred for all forms, but SERMONS , BIBLE STUDY, and DISCIPLINARY QUESTIONS **MUST BE TYPED, 8 ½ x 11, double spaced**, stapled and number pages. Return to the Office of Clergy Services.
  4. **Observe all deadlines listed on the Timeline/Checklist**
  5. Submit your materials as they are completed. You may submit copies prior to the deadline.
- 3, **ADDITIONAL REQUIREMENTS/POLICY OF BOM –**  
(1993) BOM requires a written supervision/observation report from the District Superintendent and a statement from the District Committee on Ordained Ministry. Additional interviews with the District Superintendent and the District Committee may be required.
- Any candidate, who submits material that is not their own, and fails to give proper and appropriate credit to the person or source originally responsible for the material, will be excused from the process for that year.
4. Submitted to **Clergy Services, 4908 Colonial Dr, Columbia, SC 29203** all items on the applicable **Check List**
    - Application for Clergy Relationship with the Annual Conference (**Form105**)
    - College Transcript showing completion of a minimum of **60 semester hours for AB** degree
    - Transcript showing completion of at least **FIVE YEAR Course of Study** and LP Studies
    - Report of Mentor (copy to District Office by June 15) (**SCBOM 8**)
    - Records of DS and DCOM recommendations action (**SCBOM 1**)
    - Medical Report (**Form 103**)
    - Psychological assessment, if not previously submitted with Ministry Development Services of PSCC, 5203 Sharon Road, Charlotte, NC 28210, Phone 704-554-9222, FAX 704-554-9956
    - Satisfactory Credit Worthiness Report (**SCBOM 6**) and Notarized Criminal Background Statement (**SCBOM 7**)
    - 2 x2 Photo - a recent snapshot will be sufficient, plus Biographical Information Form updated
    - One Copy each of Sermon, Bible Study and Disciplinary Questions ( **Instructions Attached**)
    - 13SCBOM-Policies and Procedures for Academic Style and Intellectual Integrity

AM10 Gdln

# **SERMON EVALUATION**

*The following areas will be used to evaluate all submitted sermons.*

*The evaluation scale is: Satisfactory, Unsatisfactory & Needs Improvement*

## **1. TITLE:**

- A. Is it attractive?
- B. Does it capture the imagination?
- C. Is it related to the main theme?

## **2. INTRODUCTION:**

- A. Does it seize attention?
- B. Is it just right, too long or too short?
- C. Is it relevant to the sermon?

## **3. CENTRAL IDEA:**

- A. Is the central idea well stated?
- B. Were the arguments sound?

## **4. CONCLUSION:**

- A. Does it relate to the introduction?
- B. Does it reinforce the main theme?
- C. Does it call for decision or action?
- D. Does it end incisively?

## **5. MAIN BODY OF SERMON:**

- A. Is it consistent with the introduction and the conclusion?
- B. Does it move the listener closer to God?

## **6. SOURCES:**

- A. Does it weave the preacher's thoughts and experiences, Bible, commentaries, biography, history, literature, observation of contemporary life together?
- B. Is proper credit given to sources?

## **7. ILLUSTRATIONS:**

- A. Is there a variety in illustrations? Does the preacher follow thru the image or example?
- B. Are the illustrations varied, apt, fresh, true to life, accurate and the right length?

## **8. TRANSITIONS:**

- A. Are transitions natural, creative, easy to follow, varied and clear?

## **9. TEXT/ EXEGESIS:**

- A. Does the sermon show evidence of good solid research?
- B. Does the sermon stay within the text?
- C. Did he/she try to cover just enough?

## **10. ANALYSIS:**

- A. Is the outline of the sermon clear?
- B. Are main points and sub-points evident?

## **11. APPEAL:**

- A. Is the appeal rational, logical, and systematic?
- B. Does the sermon raise your emotional sensitivity and affectionate qualities?
- C. Is there an intuitive, visionary, prophetic quality to the sermon?
- D. Does the sermon provide practical, down to earth suggestions for daily living?
- E. Does the sermon appeal to a combination of human needs, and personality types?

## **12. WRITING STYLE:**

- A. Is it Literary, oral, abstract, concrete, conversational, clear, direct, energetic, flowing, truthful, natural, etc...?
- B. Does the sermon relate to the liturgy?
- C. Are sentences varied in length and form?

## **13. ATTITUDE EXPRESSED:**

- A. Is it faith filled, friendly, prophetic, affirming, reconciling, interesting, informed, warm, etc...?

## **14. CULTURAL SENSITIVITY:**

- A. Was inclusive language used?
- B. Was the message relevant?
- C. Was the preacher aware of current events?
- D. Was the preacher aware of social issues?
- E. Does the preacher show knowledge of areas outside religion?

## **15. OVERALL IMPRESSION:**

- A. Is this sermon a true representation of the Good News?
- B. What is the weakest and strongest part of the sermon?
- C. Does the sermon give an overall impression of wholeness?

## **16. THEOLOGICAL CONTENT:**

- A. Is the sermon theologically sound?

## 2010 SERMON EVALUATION GUIDELINES FOR FULL MEMBERSHIP

**TO:** Candidates for Admission to Full Conference Membership in the South Carolina Annual Conference of the United Methodist Church

**FROM:** The Proclamation Evaluation Committee

**The following should be submitted to the Office of Clergy Services:**

1. **One Copy** of the completed **full sermon** and the **OUTLINE** of the sermon submitted by **Email**.
2. Include a statement describing the congregation to whom the sermon was preached, the need it sought to meet and why you think the sermon met the need.
3. Two **audio recordings (CD or tape)** of the sermon submitted by mail or delivered by hand to Clergy Services.

**Please follow these instructions:**

1. Your name and address should be in the upper right hand corner of the first page of each copy and on your cassette tape. Type your **name** at the top right of each page to help the committees easily identify your work.
2. The text for the sermon is **Mark 6: 6b-13** *Sermons will be evaluated based on the handling of this specific text.*
3. The sermon delivery time should be 15 – 20 minutes; therefore a full text is required.
4. Your full manuscript should be typewritten and double spaced.
5. Please number the pages of the sermon.
6. Include a Bibliography of sources consulted.

**The following areas will be considered in the evaluation:**

1. The sermon will be examined for theological soundness, exegetical integrity and appropriate application. Your original ideas, grounded in Scripture and experience are encouraged. Theological questions relating to your sermon may be asked during the interview. For more information see the SERMON EVALUATION sheet.
2. Clarity of communication skills will be considered very important, i.e., spelling, punctuation and proper use of the English language.
3. Traditional forms or innovative presentations may be used, but you should note that the use of innovation will be open to the subjective evaluation of the reader, so they should be carefully done.
4. **Sermon Evaluation will include examination of the following aspects of the submitted sermon:** Title, Introduction, Central Idea, Main Body, Conclusion, Sources, Illustrations, Transitions, Text/Exegesis, Analysis, Writing Style, Attitude, Cultural Sensitivity, Overall Impression, and Theological Content. For more details see the SERMON EVALUATION sheet. A copy of the evaluation of your sermon will be returned to you. The reader of your sermon will be pleased to discuss the evaluation with you.

**For Questions Contact:**

**2 audio tapes to:** 4908 Colonial Drive, Suite 122, Columbia, SC 29203

**Email 1 copy to:** Clergy Service, [clergyservices@umcsc.org](mailto:clergyservices@umcsc.org)

## DISCIPLINARY QUESTIONS FOR Associate Members

1. Type your FULL NAME, address and phone number on each item submitted. Type your **name only** at the top right of each page to help the committees easily identify your work.
2. RESTATE each question in full and number it exactly as listed below. Note that several questions have more than one part. Answer each part of the question fully.
3. Answers must be **TYPED**, 8 ½ x 11 **Double-spaced**, **number** all pages.
4. Email **ONE** copy **Part I and Part II** separately to Clergy Services
5. Your answers should be honest reflections of where you are presently on your journey of faith. Be straightforward in your answers. Give proper credit, if you make use of quotes or paraphrase.
6. The answers to all (Parts I & II) of the questions must be **no more than twenty-five pages** in length.
7. Papers not meeting all of the above instructions and requirements will be returned to the Sender.

**Prepare and submit a written response to the following questions: (Par. 324.9, Discipline)**

### **PART I: FOR COMMITTEE ON THEOLOGY AND DOCTRINE: (Questions a, b, c, d, e, f, g, h, i and p )**

- a) Describe your personal experience of God and the understanding of God you derive from biblical, theological and historical sources.
- b) What is your understanding of evil as it exists in the world today?
- c) What is your understanding of humanity, and the human need for divine grace?
- d) How do you interpret the statement Jesus Christ is Lord?
- e) What is your conception of the activity of the Holy Spirit in personal faith, in the community of believers, and in responsible living in the world?
- f) What is your understanding of the kingdom of God; the Resurrection; eternal life?
- g) How do you intend to affirm, teach and apply Part II of the *Discipline* (Doctrinal Standards and Our Theological Task) in your work in *the ministry to which you have been called*?
- h) The United Methodist Church holds that the living core of the Christian faith was revealed in Scripture, illumined by tradition, vivified in personal experience, and confirmed by reason. What is your understanding of this theological position of the Church?
- i) Describe the nature and mission of the Church. What are its primary tasks today?
- p) Explain the role and significance of the sacraments in the ministry to which you have been called.

### **PART II: FOR COMMITTEE ON CALL AND DISCIPLINED LIFE (Questions j, k, l, m, n, and o)**

- j) Discuss your understanding of the primary characteristics of United Methodist polity.
- k) How do you perceive yourself, your gifts, your motives, your role, and your commitment as a provisional member and commissioned minister in The United Methodist Church?
- l) Describe your understanding of *diakonia*, the servant ministry of the church, and the servant ministry of the provisional member and commissioned minister.
- m) What is the meaning of ordination in the context of the general ministry of the Church?
- n) Describe your understanding of an inclusive church and ministry.
- o) You have agreed as a candidate for the sake of the mission of Jesus Christ in the world and the most effective witness of the gospel, and in consideration of their influence as ministers, to make a complete dedication of yourself to the highest ideals of the Christian life, and to this end agree to exercise responsible self-control by personal habits conducive to bodily health, mental and emotional maturity, integrity in all personal relationship, fidelity in marriage and celibacy in singleness, social responsibility, and growth in grace and the knowledge and love of God. What is your understanding of this agreement?

**1 copy Part I to:** Chair of Theology & Doctrine:

**1 copy Part II to:** Chair Call and Disciplined Life :

**1 copy Parts I & II separately to:** Clergy Service, 4908 Colonial Dr, Suite 122, Columbia, SC 29203

2009

**DISCIPLINARY QUESTIONS INSTRUCTIONS TO ASSIST IN YOUR RESPONSE  
FROM THE COMMITTEE ON THEOLOGY AND DOCTRINE**

(Adopted by Board of Ordained Ministry 11/18/98)

1. Answering the Disciplinary Questions offers you an opportunity to demonstrate your proficiency in articulating Christian theology and the doctrine of the Church.
2. Read and answer each question carefully. Each part of each question is to be addressed. Be aware that certain questions call for examples from your personal experience and/or ministry.
3. Each question requests that you address in writing at least one basic doctrine of the Church. You should, at a minimum, consider that doctrine(s) from the following viewpoints:
  - a. rootage of the doctrine in **Scripture**,
  - b. development of the doctrine within Christian **history/tradition**,
  - c. impact of the doctrine of the Methodist **experience** (and the Methodist experience in the doctrine), and
  - d. impact of the doctrine on your personal theology and the impact of your personal experience on your understanding of the doctrine.
4. Your answers are to be an exercise in critical **theological thinking**. Remember that the Discipline requires that you “should demonstrate the ability to communicate clearly in both oral and written forms” (2008 Discipline, Par 330.3). Be aware that your reader will take seriously every word that you have written. Your responses should be written with the same care as your seminary work.

## 2010 BIBLE STUDY INSTRUCTIONS

To fulfill the requirements of the Discipline and the Policy Guidelines of the Board of Ordained Ministry, all candidates must prepare a plan and outline for teaching a book or books of the Bible.

To meet this requirement you are expected to prepare a plan for teaching the Gospel of **JOHN**

Please prepare a plan for teaching a minimum of 6 or a maximum of 8 lessons following the instructions given below. Your Bible Study should be approximately 18 pages in length.

PLEASE FOLLOW THESE INSTRUCTIONS CAREFULLY.  
EACH SECTION SHOULD BE COMPLETED AS THE DIRECTIONS REQUIRE.  
EACH SECTION WILL BE EVALUATED SEPARATELY.

I. A description for the setting of the Course.

- A. To whom will you teach these lessons?
- B. Where will you teach these lessons?
- C. When will you teach these lessons? How long will each lesson be?

II. An Introduction to this book (You will need to do reading and research on this book of the Bible and then write a short, scholarly paper **IN YOUR OWN WORDS**, using **quotation marks** to denote any words that are not your own, properly footnoting any quotations as well as any ideas that are not your own.) Your paper should include a scholarly discussion of the following items:

- A. Title
- B. Authorship
- C. Date of writing
- D. Historical setting of the writing of this book
- E. Major themes and distinguishing characteristics of this book
- F. Bibliography of sources used for this scholarly paper

III. Brief lesson plans for **EACH** of the lessons for the Bible study. You will need to prepare 6 to 8 different lesson plans, depending on how many lessons you are going to teach. You will need to include the following for **EACH** lesson:

- A. Title of the lesson
- B. Purpose of the lesson (One sentence stating what you hope the class will learn.)
- C. An outline of the lesson you are going to teach (NOT an outline of the scripture) in order to accomplish your stated purpose. Be sure to employ a variety of teaching methods and aides.

IV. A complete lesson plan for any one of the lessons outlined in Section III. This plan should be detailed enough and clear enough for a substitute to use to teach your class effectively.

Your lesson plan should include:

- A. Your purpose statement (A description of what you hope to accomplish in this session. This is the “big idea”)

- B. A detailed description of how you will accomplish that purpose
1. List two or three objectives that will help you accomplish your purpose  
(What specific things do you want to happen? What do you want the outcome of the lesson to be?)
  2. Introduction to the session (How will you begin?)
  3. Body of the lesson (What activities will you select? What material will you cover? What questions will you ask? How long will each part of the lesson take? How will you help participants discover the meaning of the lesson for their own lives?)
- Make sure everything you decide to do
- a. Connects with the purpose of the session
  - b. Is appropriate to the age and abilities of the participants
  - c. Is appropriate to the setting/location
  - d. Works together to create a meaningful “rhythm” and flow for the session
3. Conclusion (How will you end the session?)  
(Like a well developed paper, a well developed lesson plan has a clear and engaging beginning, a well-planned and cohesive body, and a strong conclusion.)
- C. Resources and aides (Make a list of everything you will need to plan for and implement the lesson.)
1. Include the name and publisher of any audio or visual aides
  2. Be sure to tell how each will be used to support the purpose of the lesson

V. Course evaluation - an instrument to be distributed to the class at the end of the series of lessons in order for participants to evaluate all facets of the course.

VI. Personal growth statement - A statement describing your own personal growth as you researched, planned and prepared to teach these lessons.

VII. Bibliography of sources used for the lesson plans.

**Note: Please number your pages. Send one (1) copy by email to the Chair of the Bible Study Committee. Send one (1) copy to the Coordinator of Clergy Services. Instructions must be carefully followed. If you have limited experience in writing lesson plans, please consult an educator for assistance.**

**Email copy of Bible Study to:** Chair of Bible Study Committee:

**Email copy of Bible Study to:** Clergy Services, 4908 Colonial Drive, Columbia, SC 29203, email [clergyservices@umcsc.org](mailto:clergyservices@umcsc.org)

## BIBLE STUDY EVALUATION

CANDIDATE \_\_\_\_\_ DATE \_\_\_\_\_

STATUS SOUGHT \_\_\_\_\_ READERS \_\_\_\_\_

	<u>E</u>	<u>A</u>	<u>M</u>	<u>U</u>
<b>Section I Description of the setting of the course</b>				
A. Who, when, where	—	—	—	—
<b>Section II Scholarly Paper</b>				
A. Title, Author, Date	—	—	—	—
B. Historical setting	—	—	—	—
C. Themes and Characteristics	—	—	—	—
D. Bibliography for paper	—	—	—	—
<b>Section III Lesson plans for the course</b>				
A. Title and Purpose	—	—	—	—
B. Lesson Outlines	—	—	—	—
C. Teaching Methods and Aids	—	—	—	—
<b>Section IV Detailed lesson plan</b>				
A. Purpose and Objectives	—	—	—	—
B. Introduction	—	—	—	—
C. Body of Lesson (questions, activities, etc.)	—	—	—	—
D. Conclusion	—	—	—	—
E. Teaching Methods	—	—	—	—
F. Teaching Aids	—	—	—	—
<b>Section V Evaluation instrument</b>	—	—	—	—
<b>Section VI Personal Growth Statement</b>	—	—	—	—
<b>Section VII Bibliography for lesson plans</b>	—	—	—	—

E - Excellent    A - Acceptable    M - Marginal    U - Unacceptable

**OVERALL BIBLE STUDY IS** \_\_\_\_\_ **Acceptable** \_\_\_\_\_ **Unacceptable**

**Policies and Procedures for Academic Style and Intellectual Integrity**  
**South Carolina Board of Ordained Ministry**

(Recommended April 24, 2003 by BOM to Annual Conference 2003)

**Standards for Academic Style:**

All work submitted to the Board should be guided by standards of academic style commonly required by institutions of higher learning. Footnotes and bibliography should be done in accordance with the most recent edition of *A Manual for Writers of Term Papers, Theses, and Dissertations*, by Kate Turabian. Failure to properly document sources will result in a re-write.

**Standards for Intellectual Integrity:**

At a level more fundamental than academic style, all work submitted to the Board should exhibit a standard of intellectual integrity appropriate for the covenant of ordained ministry within the Body of Christ. The Board defines intellectual dishonesty as submitting work that is not one's own.

The Board will investigate intellectual dishonesty in the following way. When a candidate's two readers and the chair of the relevant committee find evidence of possible intellectual dishonesty, the candidate will be notified that s/he will be examined about this issue as a part of his/her regularly scheduled Board interview process. If evidence of intellectual dishonesty is found, the candidate may either withdraw from the ordination process for one year or write a letter of appeal to the chairperson of the Board requesting consideration at the next regularly scheduled Board meeting.

**Signed Statement:**

Completion of the following statement indicates that you understand both the standards of academic style expected by the Board and the meaning and consequences of intellectual dishonesty. Please submit a signed copy of this statement to *the Office of Clergy Services*.

"I certify that the work I am submitting is my own. I have given proper credit to all sources of information and have neither given nor received unauthorized assistance, as defined in section XIX.C.4 of the South Carolina Conference Board of Ordained Ministry Policy Guidelines."

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Submit one signed copy, which will apply to all submitted work, and mail to Clergy Services.**

13SCBOM

**FULL NAME of CANDIDATE:**

**Associate Member 2010**

## TIMELINE/CHECKLIST FOR ASSOCIATE MEMBER

### DUE JUNE 18:

- \_\_\_\_\_ 1. **F105** APPLICATION SIGNED REQUESTING **ASSOCIATE MEMBERSHIP**
- \_\_\_\_\_ 2. VERIFICATION OF PACKET CONTENTS

### DUE BY EMAIL TO CLERGY SERVICES OCTOBER 23:

- \_\_\_\_\_ 3. Sermon **Mark 6: 6b-13**
- \_\_\_\_\_ 4. Disciplinary Questions a. Part 1 (Committee on Theology and Doctrine)  
b. Part II (Committee on Call and Disciplined Life)
- \_\_\_\_\_ 5. Bible Study on **John**

### DUE NOVEMBER 13:

- \_\_\_\_\_ 6. Academic Integrity Statement (**13SCBOM**)
- \_\_\_\_\_ 7, Medical Report **Form 103** in year of application
- \_\_\_\_\_ 8. Credit Worthiness Statement and Authorization (**06SCBOM**)
- \_\_\_\_\_ 9. Notarized Criminal Background Check (**07SCBOM**) \$35.00 SC Conference Treasurer
- \_\_\_\_\_ 10. Report of Mentor signed by candidate and mentor (**08bSCBOM**) due to DS
- \_\_\_\_\_ 11. Updated autobiographical (**Form 102**)
- \_\_\_\_\_ 12. Current Photo (2X2)
- \_\_\_\_\_ 13. College Transcript completion of minimum of 60 hours
- \_\_\_\_\_ 14, Transcript showing completion of five (5) year Course of Study
- \_\_\_\_\_ 15. Psychological Assessment (confirm if in current permanent file)

### DUE FROM DISTRICT OFFICE FEBRUARY 1:

- \_\_\_\_\_ 16. **DS** Supervisory Observation Report (**05SCBOM**)
- \_\_\_\_\_ 17. **DCOM** Action Report by  $\frac{3}{4}$  majority vote (Par.324.10) (**01SCBOM**)

### INTERVIEWS WITH FULL BOARD FEBRUARY 9-11, 2010

Letter to candidates from BOM Registrar setting date and time of interview approximately 3-4 weeks prior to meeting.

### FINAL APPROVAL AT ANNUAL CONFERENCE June 10-13, 2010

- \_\_\_\_\_ 20. Must be approved by 2/3 majority vote of Clergy Session; reception and Ordination Service at Annual Conference

Associate Member 2010