



The responsibilities of clergy are derived from authority given in ordination or licensing. Elders and Local Pastors have a fourfold Ministry of Word, Sacrament, Order and Service and thus serve the Church in witness and service of Christ's love and justice. This form requests information to help in assessing an individual's mental and/or physical fitness for ministry at this time.

Name of Individual _____ Date _____

Name of Physician/Counselor completing report _____

Word and ecclesial acts:

1) Preaching, leading in worship and teaching are vital acts in the life of local congregations. These actions include public speaking, standing for extended periods of time, engaging in lengthy dialogical exchanges. Are there any limitations that would preclude this person from being able to perform these duties? Yes or No If yes, please describe

2) Officiating at ecclesial acts such as marriages and funerals are an everyday occurrence in the duties of a clergyperson. Are there any issues which would hamper this person in his/her ability to officiate at such events? Can this person handle the stress which accompanies working with the families in such emotional times? Would you be concerned if this person had three funerals, a wedding and normal sermon preparation all occur in a seven day work week? Yes or No

If yes, please describe _____

3) Visitation to the sick, aged, imprisoned and others in need is expected of persons in ministry. Are there limitations on this person that would limit the amount of time s/he could drive? Could sit upright? Could listen/concentrate? Yes or No If yes, please describe _____

Sacrament

1) Elders and local pastors are charged with sacramental responsibility. They are to administer the sacraments of baptism and Holy Communion. Are there any issues which would limit this person in fulfilling her/his leadership role in these sacramental roles? Yes or No If yes, please describe

Order

1) This person will be expected to be the administrative officer of the local congregation. Are there concerns about this person's ability to work a 60 hour or more work week as is sometimes necessary? Would you have concerns as to how this person would respond to the stress of a conflicted situation? Can this person physically and mentally handle the stress associated with budget demands? Yes or No If yes, please describe

2) Is this person capable of overseeing staff? Can s/he provide daily oversight to not only paid staff, but volunteers in a diversity of ministry settings? Would there be any limitations/concerns you might have for him/her in this area of ministry? Yes or No If yes, please describe _____

Service

1) It is anticipated that an Elder or local pastor would participate in community, ecumenical and inter-religious concerns. Are there any concerns/limitations you see on this person to engage in high profile public leadership? Are there any factors that need to be addressed prior to engaging in such endeavors? Yes or No If yes, please describe

Other

1) Does this person have any physical limitations/concerns? Yes or No If yes, please describe _____

2) Does this person have any mental/emotional limitation/concerns? Yes or No If yes, please describe

3) Are there any ongoing medical/counseling follow-ups planned? Yes or No If yes, please describe

4) Are there any issues of which this committee needs to be aware? Yes or No If yes, please explain

Signature of Physician/Counselor completing report _____