

Report of Candidate's Pastor

Candidate's Name: _	Candidate Pastor's Name:			
District:	Charge:	Church/Mini	Church/Ministry:	
Mailing Address:		City:	State:	Zip:
I confirm that the (leader.	Candidate has read "The Cl	nristian as a Minister," and discussed i	t with me or ar	nother United Methodist
I also confirm that:				
baptized _I	· · · · · · · · · · · · · · · · · · ·	per in good standing with the United N United Methodist campus ministry or		
-	at least a yea	r or more		
	less than one	year. If less than one year, how long _		?
Candidate Past	cor's Signature	 Date		