



**DISTRICT COMMITTEE ON MINISTRY
ACTION REPORT**

District: _____ Date: _____

Candidate: _____

On Ordination Track? Yes No Which Track? Elder Deacon

Candidate's Address: _____

Phone: _____ Email: _____

Date Certified: _____ Date Licensed: _____

Attending: College Seminary Name of School: _____

Names of Interview Team:

The dCOM took the following action regarding the person listed above. (Check all that apply).

For Certified Lay Minister

- Recommended for certification as a Certified Lay Minister. (¶271)
- Recommended for biannual recertification as a Certified Lay Minister. (¶271)

For New Candidates

- Recognized as a candidate for ministry upon initial interview.
- Granted certified candidate status by ¾ majority vote by written ballot. (¶666.6) ***(Please select one of the following options:)***
 - Recommends licensing pending successful completion of the studies for licensing as a local pastor **(NOTE: dCOM must vote on recommendation for licensing after completion of studies).**
 - Candidate must interview with dCOM for recommendation for licensing after successful completion of the studies for licensing.

Comments for Licensing Interview:

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For Previously Certified Candidates

- Recommended to BoOM to be awarded the license as a local pastor if and when appointed to a local parish by ¾ majority vote. (¶315)
- Recommended for continuation as a certified candidate. (¶312)
- Discontinuance of certified candidacy (¶314.1), check one:
 - Candidate requested discontinuance.
 - dCOM made decision to discontinue candidate.
- Reinstatement of certified candidacy (¶314.2)

For Current Local Pastors

- Recommended to BoOM for continued eligibility for appointment as a local pastor. (¶319)
- dCOM does not recommend continuance (¶320.1)
- Withdrawal under complaints and charges (¶320.2)
- Recommended for reinstatement of approval to be appointed as a local pastor. (¶320)
- Recommended for recognition as a retired local pastor (¶320.5)

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 (please check one).

- Full-time Local Pastor (FL) (¶318.1).
- Part-time Local Pastor (PL) (¶318.2).
- Student Local Pastor (SP) (¶318.3). (Conference) _____

Associate Membership or Provisional Membership

- Recommended for associate membership (¶322.1)
- Recommended for election to provisional membership toward deacon’s orders by ¾ majority vote. (¶324.10)
- Recommended for election to provisional membership toward elder’s orders by ¾ majority vote. (¶324.10)

Other Denomination or Other Methodist Denomination

- Recommended to serve as Other Denomination (OD) (¶346.2)
Name of Denomination: _____
- Recommended for election to provisional membership by ¾ majority vote. (¶347.3)
Name of Denomination: _____
- Recommended to serve as Other Methodist (OM) (¶346.1)
Name of Denomination: _____
- Recommended for election to provisional membership by ¾ majority vote. (¶347.2)
Name of Denomination: _____
- Recommended for election to full membership and recognition of orders from an Other Methodist denomination (OM) by ¾ majority vote (¶347.2)
Name of Denomination: _____

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Reinstatement

- Recommended for readmission to conference relationship
 - Readmission to provisional membership (§365).
 - Readmission after honorable or administrative location (§366).
 - Readmission after leaving the ministerial office (§367).
 - Readmission after termination by action of the annual conference (§368).

Other

- This person is not licensed but approved to serve in Supply Status

Comments:

Signature of DCOM Chair or Registrar

Date

Please upload form into UMCARES in the individual's profile