## THE JOHN KNOX PRESBYTERY ANNUAL REPORT TO PRESBYTERY BY A TEACHING ELDER IN A VALIDATED MINISTRY

The John Knox Presbytery through the Committee on Ministry requires annual reports from ministers of the Word and Sacrament in order to determine that they are fulfilling the criteria for membership and are in validated ministries (G-2.0501, G-2.0502, G-3.0104, G-3.0307).

Please complete this report and return it by DECEMBER 31, 2019 to:

The John Knox Presbytery Attn: Committee on Ministry P. O. Box 350 Richland Center, WI 53581

jkp@jknox.org

I.	NAME						
	MAILING ADDRESS						
	CITY		STA	ATE	ZIP		
	TELEPHONE (HOME) (OFFICE) CELL E-MAIL						
	CELL	I	E-MAIL	_			
	DATE	E OF ORDINATION					
	DATE OF ORDINATION SPOUSE'S NAME						
**							
II.	Validation criteria						
	A. In Service Beyond the Jurisdiction of This Church (G-2.0503a):						
		Please attach a position des					
		Administrator	Start date: _				
		Place of service					
		Chaptain	Start date.				
		Place of service					
		Consultant	Start date:				
		Place of service					
		Evangelist	Start date:				
		Place of service					
		Missionary	Start date:				
		Place of service	_				
		Pastor	Start date:				
		Place of service					
		Social worker	Start date:				
		Place of service	_		·····		
		Other	Start date:				
			_				
	B.	Member-at-large (G-2.0503b)					
		In what ways are you in compliance (see enclosed sheet) with the Book of Order (G-2.0502)?					
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	C.	Inactive Member (G-2.0508)					
		In what ways are you in com	pliance (see enc	losed sheet) with th	ne Book of Order (G-2.0502)?		
III.	Please respond to the following questions:						
		A. Did your session/employer evaluate your performance this year?					
		Yes No					
		Did your session/employer evaluate the performance of all employees?					
		Yes	No	1	•		

B.	Contin	nuing Education				
	1.	Please describe how you used your Continuing Education leave this year: If any or all of these pursuits were worthwhile, please indicate why you would recommend them.				
	2.	Did your session/employer discuss and approve your Continuing Education leave? Yes No				
	3.	If you did not use your Continuing Education this year, when did you last use it?				
C.		sed please find a copy of John Knox Presbytery's Sexual Misconduct Policy for eview. Have you attended a Boundary Training Workshop within the past three				
	ycars:					
		Yes When and where? No When was the last time you did?				
D.	Please share how you have lived out your commitment to the John Knox Presbytery this year after reflecting upon the following constitutional questions (W4.4003):					
	you be orderi	you be governed by our church's polity, and will you abide by its discipline? Will a friend among your colleagues in ministry, working with them, subject to the ng of God's Word and Spirit?" (5) and "Will you be active in government and line, serving in the governing bodies of the church?" (9)				
	I woul	d like to serve on the following committee(s) of the John Knox Presbytery:				
Е.	Name Locati	If your service is not to a congregation, where do you usually worship?  Name of church  Location  Presbyterian Other Attendance: regular occasional not at all				
F.	pastora provid pastora	Who do you and/or immediate family members consider to be your primary source of pastoral care? NOTE: John Knox Presbytery staff has provided and will continue to provide pastoral care to teaching elders. This question has been added to ensure that pastors and their families have planned for immediate pastoral care nearby should it be needed. (Please provide name and contact information for that individual.)				
G.	Would	I you like to meet with the Committee on Ministry? Yes No				
Pleas	e add anv	comments that would assist the Committee on Ministry in its work				

The Committee on Ministry thanks you for your faithful service in the John Knox Presbytery.