



## Validated Ministries Annual Report

In accordance with Presbytery of Baltimore [Policy on Validation of Ministries](#), this form is to be used by members of the Presbytery who are currently enrolled as:

CATEGORY A2 – In other service to this church (Validated Ministry)

CATEGORY A3 – In service beyond the jurisdiction of this church (Validated Ministry)

CATEGORY B – Member-at-Large

CATEGORY D – Inactive Member

Requests to change status should be made using the appropriate application form.

Please complete this form and return it to the Stated Clerk by September 14, 20\_\_\_. As the membership of the Credentials Team, which reviews these forms, changes annually, please complete all applicable sections completely.

### I -PERSONAL INFORMATION (please make corrections as necessary)

NAME \_\_\_\_\_

Address Line \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

E-mail address \_\_\_\_\_

Your Current Status is listed as \_\_\_\_\_

If you believe this status is incorrect, please contact the Presbytery Office immediately.

Date enrolled in this status \_\_\_\_\_

## II - PRESBYTERY/CONGREGATION INVOLVEMENT

Persons enrolled in Categories A2, A3, B, and D are expected to maintain participation in the Presbytery of Baltimore and a Congregation.

Are you currently serving as a Parish Associate? \_\_\_\_ Yes \_\_\_\_ No

If so, at which church? \_\_\_\_\_

Please explain your current involvement with the Presbytery and a Congregation or explain why a waiver to one or both requirements is appropriate.

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If you are in Category A2 or A3, please complete the following:

Your Title \_\_\_\_\_

Your Employer \_\_\_\_\_

Your Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Brief Position Description \_\_\_\_\_

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Has there been a significant change in your job description in the past year? \_\_\_\_ No \_\_\_\_ Yes

If you answered Yes, please explain: \_\_\_\_\_

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Please go to Section VI.

**IV - MEMBER AT LARGE** If you are in Category D, please go to Section V. If you are in Category B, please complete the following:

- Reason for status:     Seeking a call                       Graduate study  
                                  Illness or disability                       Family responsibilities  
                                  Government service                       Service Ministry  
                                  Minister in transition

If Seeking a call, please describe your efforts and submit a copy of your PIF

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If in a graduate study program, please complete the following:

Field of study                      \_\_\_\_\_

School                                      \_\_\_\_\_

Degree sought  
\_\_\_\_\_

Expected graduation date                      \_\_\_\_\_

If in Government Service or Service Ministry, please describe position briefly:

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If Minister in Transition, please describe your plans. Note that members are not allowed to remain in this status for more than 18 months.

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Please go to Section VI

## V - INACTIVE MEMBERS

Please describe your plans. Note that members are not allowed to remain in this status for more than three years.

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Please go to Section VI

## VI - ALL RESPONDENTS

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

**Please complete this form and return it by September 14 to:  
Stated Clerk [statedclerk@baltimorepresbytery.org](mailto:statedclerk@baltimorepresbytery.org)**

**or mail this form to:**

**Stated Clerk**

**Presbytery of Baltimore 5400 Loch Raven Boulevard Baltimore, MD 21239**

Please note that any change to your status should be reported to Committee on Ministry, via the Stated Clerk, as soon as practicable.