

ANNUAL MINISTERIAL STANDING REVIEW CHRISTIAN CHURCH IN KANSAS (DISCIPLES OF CHRIST)

Explanation: In keeping with **The Design** of the Christian Church, Regions are responsible for reviewing and certifying the Standing of all ordained and commissioned Disciples clergy each year. When your Standing is acknowledged by the Region your name is listed in the official *Year Book and Directory* of the Christian Church (Disciples of Christ) for the ensuing year. Ministers with Standing may call upon the Christian Church for services, support, references, relocation assistance, denominational endorsement and scholarship aid.

FAILURE TO COMPLETE, SIGN AND RETURN THIS FORM BY

January 13, 2012

WILL INDICATE THAT YOU NO LONGER DESIRE STANDING

SECTION I

Name _____ Spouse's Name _____
(First) (Last)

Home Address _____
(Address) (City) (Zip)

Home Phone (_____) _____ E-mail _____

Cell Phone (_____) _____ Fax (_____) _____

My church membership is in _____
(Church Name and Location)

Circle all earned degrees: AA BA/BS MA BD M.Div. D.Min. Ph.D.

Other: _____

If you have done a doctoral dissertation/thesis/emphasis, please list it below.

Are you ordained? _____ By whom? _____ Date _____

Are you commissioned? _____ By whom? _____ Date _____

To the best of your knowledge, do you currently have ministerial Standing with the Christian Church in Kansas (Disciples of Christ)? Yes _____ No _____

Do you wish to continue your ministerial Standing with the Christian Church in Kansas (Disciples of Christ)? Yes _____ No _____

What year did you begin ministry in Kansas? _____

How many years have you been in your current position? _____

Present ministerial position: _____

I am engaged in ministry: Full Time _____ Part Time _____ Supply Preaching _____
Interim _____ Retired _____ Other (explain) _____

Ministry Site: _____
(Name) (Mailing Address) (City) (Zip)

Phone (_____) _____ Fax (_____) _____

E-Mail _____ Website _____

What is it about your ministry in the past year that has reconfirmed your call to ministry? Attach an additional statement, if needed, to interpret how your work is ministerial in purpose.

SECTION II

I participated in the following events this past year:

Regional Assembly _____ Minister's Week at PTS _____ Brite _____ Other _____

District Assembly _____ Boundaries Training _____ Ecumenical Efforts _____

Cluster/District Minister's Meetings _____ Camp Counselor/Director _____

Other _____

Describe some of the ways your ministry has grown and developed recently. (You may wish to share something about your continuing education or reading.)

Please share how your ministry has been challenging, joyous or faithful in the past year.

List the responsibilities accepted and services performed during the past twelve months.

Cluster _____

District _____

Regional _____

General _____

Ecumenical _____

How can the congregation of which you are a member and the Clergy Care Ministry be supportive of you and your ministry?

Do you have a sabbatical program? Yes _____ No _____

Would you like help in developing a sabbatical program? Yes _____ No _____

Do you have a child abuse prevention policy? Yes _____ No _____

Would you like help in developing a child abuse prevention policy? Yes _____ No _____

If you are currently serving a congregation, do you have a Pastoral Relations Committee?

Yes _____ No _____

Would you like help in developing/training for a PRC? Yes _____ No _____

Do you receive an annual performance review (evaluation)? Yes _____ No _____

Are you willing to be a faithful minister serving within and supportive of the Christian Church (Disciples of Christ)? Yes _____ No _____

I have read and understand the following ministry policies of the region (available upon request or at <http://www.kansasdisciples.org>):

- Theological Foundations and Policies and Criteria for the Ordering of Ministry
- The Ethical Affirmations for My Ministry
- The Regional Policy on Clergy Sexual Conduct
- The Regional Policy on Clergy Misconduct (Non-Sexual)

Furthermore, I understand that these are the operational documents for the Region's Committee on Standing.

Yes _____ No _____

******* Personal Disclosure Statement *******

(If the answer to any of the following questions is yes, please attach an explanation.)

1. Have you ever been charged with or convicted of a felony? Yes _____ No _____
2. Have you ever been charged with or convicted of any crime against children or other persons?
Yes _____ No _____
3. Is there any other fact or circumstance in your background that should prevent you from being entrusted with the supervision, guidance, and care of children or youth?
Yes _____ No _____

By signing below I certify the information provided above is accurate.

Signature: _____ Date: _____

Your standing will not be approved without this signed disclosure.

Return this form no later than January 13, 2012 to:

**Paxton Jones, Regional Minister
Christian Church in Kansas
2914 SW MacVicar Ave
Topeka, KS 66611-1787**

[PLEASE KEEP A COPY OF THIS FOR YOUR RECORDS]

Reviewed by: _____

Approved _____ Pending _____ Denied _____

Revised 11/11