

**PLEASE DOWNLOAD THIS FORM AND SAVE AS
FirstNameLastName_MinistryReport2024**

**SAINT PAUL AREA SYNOD 2024 REPORT FOR ROSTERED MINISTER
ON LEAVE FROM CALL**

Information on this form may be shared with other synod staff persons during the mobility process

I am a: Pastor Deacon

Full name: _____ Date: _____

Info below is same as last year (if checked, skip the following section):

Date of Ordination/Consecration: _____ Date of Birth: _____

Home mailing address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Preferred Phone: Home Cell

Full name of spouse: _____ Date of marriage: _____

Children: Full Name	Relationship	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name and location of congregation of which you are a member:

1. What were the major challenges you personally faced in 2023 and how did you respond?

2. Where have you found support and strength?

3. What is one thing you love about your vocation even in this time of being on leave from call?

4. What resources or support from the synod would help you in 2024?

5. What else would you like the bishop to know about your life and ministry?

PLEASE SAVE & EMAIL YOUR COMPLETED FORM TO: patricia.lull@spas-elca.org