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FirstNameLastName_MinistryReport2026

2026 SAINT PAUL AREA SYNOD REPORT FOR ROSTERED MINISTER
RETIRED

Information on this form may be shared with other synod staff persons

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I am a: ◯ Retired Pastor ◯ Retired Deacon

Full Name: _____ Date: _____

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

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

Date of Retirement: _____

Mailing address: _____ City: _____ State: _____

Zip Code: _____ Country: _____ Home Phone: _____

Cell Phone: _____ Email: _____

Alternate address (winter/summer address) to be used from: _____ (Month) to _____ (Month)

_____

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

Alternative Phone: _____ Preferred phone: ◯ Home ◯ Cell ◯ Alternate

Full name of Spouse or primary contact person: _____

Date of marriage: _____

Address of Primary contact person (if different from above): _____

City: _____ State: _____ Zip Code: _____ Phone: _____

1.) Where have you experienced God's grace this past year?

2.) The church is called to be an agent of God's reconciliation in Jesus Christ. (2 Corinthians 5:18-19). What step(s) have you taken to address the polarization that divides our communities?

3.) What wisdom do you have for the next bishop of the Saint Paul Area Synod?

PLEASE SAVE FirstNameLastName_ MinistryReport2026
EMAIL YOUR COMPLETED FORM TO: patricia.lull@spas-elca.org
Please know that Bishop Lull will not read these until later this spring.
If you have an urgent concern, please contact the above email to set up a time to meet.