Community Ministry Portfolio

OFFICE FOR TRANSITION MINISTRY

Current Status (check one)

Developing Self-Study

No Longer Receiving Names

Developing Profile

Receiving Names

Search Complete

Re-opened

Basic Information

Diocese: Name of Church/Institution:

Address: **Email:** Phone:

Contact Name/Phone/Email:

Position Title (check one)

Academic Dean/Professor **Beginning Search**

Asst/Assoc/Curate Seeking Interim Interim in Place

Bishop

Cathedral Dean/Staff

Chaplain

Church Planter/Redeveloper

Consultant

Diocesan/Regional Staff

Ecumenical Ministry

Executive Director

Interim

Musician

National Staff

Parish Staff

Pastoral Care/Counselor

Rector/Vicar

Religious Order

Retreat Director/Staff

School Head/Staff

Seminarian

Specialized Ministry

Spiritual Director

Youth Minister

Receiving Names Until: (provide date)

Order of Ministry: (circle one) Bishop Deacon Lay Lay or Ordained Priest

Weekly Average Sunday Attendance(ASA):

Weekday Services: # Weekend Services: # Other Services/Month:

1

Compensation, Housing & Benefits

Current Annual Compensation: \$ Cash Stipend: sula **Housing/Rectory:** \$ () check if housing supplied If supplied, for _____people Plus **Utilities:** \$ (if separate from housing figure) plus SECA: \$ representing reimbursement of: (circle one) Full / Half / Other **Compensation Available for New Position: \$** Negotiable? Yes No (circle one) Pension: \$ () check to affirm compliance with CPF requirements Healthcare Option: (circle applicable) Full family /Clergy+1 / Clergy only / Negotiable Dental Option: (circle one) Yes / No Housing Equity Allowance in Budget? (circle one) Yes / No Amount: \$ **Vacation Time**: **Continuing Education Time:** Cont. Education Budget: \$ Sabbatical Provision: (circle one) Yes / No Travel/Auto Budget: \$ Travel/Auto Account: (circle one) Yes / No Other Professional Account: (circle one) Yes / No Professional Budget: \$ **Additional Compensation note:** (~20 words)

Incumbent History & Church/Day Schools

(begin with most recent incumbent and record earlier dates in order)

Name	Position Title
Date Begun	Date Ended
Name	Position Title
Date Begun	Date Ended
Name	Position Title
Date Begun	Date Ended
Name	Position Title
Date Begun	Date Ended
(Comments)	

Church School

Number of Teachers/Leaders for Children's Church School:

Number of Students for Children School:

Number of Teen/Young Adult:

Number of Teachers/Leaders for Adult Church School:

Number of Students (Adults):

Day School

Number of Teachers for Day School:

Total Staff for School:

Number of Students:

Narrative

In our baptism we promise to proclaim by word and example the Good News of God in Christ, seeking and serving Christ in all persons. You are invited here to reflect on your ministry by responding to at least five (5) of the following questions (approximately 200 words, 1200 characters, each response). You may answer in more than one language, if appropriate.

Describe a moment in your worshipping community's recent ministry which you recognized as one of success and fulfillment.

Describe your liturgical style and practice. If your community provides more than one type of worship service, please describe all.

How do you practice incorporating others into ministry?

As a worshipping community, how do you care for your spiritual, emotional, and physical well-being?

How do you engage in pastoral care for those beyond your worshipping community?

Describe your worshipping community's involvement in either the wider Church or geographical region?

Tell about a ministry that your worshipping community has initiated in the past five years. Who can be contacted about this?

How are you preparing yourselves for the Church of the future?

Please provide 4-6 words (separated by commas) describing the gifts and skills essential to the future leaders of your worshipping community?

Connections

Your Worshipping Community's website:

You may provide the media links to your worshipping community:

You may provide links here to other sites where you might be found (may be audio/YouTube,etc.)

Languages significantly represented in your worshipping community:

Approximate number of people:

Please note worship or classes you offer in the following languages:

Comments

References

Bishop's Name: Bishop's Contact Information:

Diocesan Transition Minister's Name
Diocesan Transition Minister's Contact Information

Current Senior Warden's Name: Current Senior Warden's Contact Information:

Previous Senior Warden's Name Previous Senior Warden's Contact Information:

Nominating/Search Committee Chair's Name: Nominating/Search Committee Chair's Ministry: Nominating/Search Committee Chair's Contact Information

Parish/Institution Leader's Name:
Parish/Institution Leader's Ministry:
Parish/Institution Leader's Contact Information

Local Community Leader's Name: Local Community Leader's Relationship: Local Community Leader's Contact Information: