

RECOMMENDATION FOR MINISTRY

Church: _____ Number: _____ Charge: _____

District: _____ North Georgia Annual Conference UMC

Date: ____ / ____ / ____

I. Recommendation to become candidate for ordained ministry:

(Charge Conference can vote only after mentor completion, DS authorization & PPR approval)

(A)

Name: _____

Address: _____

Phone: _____ E-mail: _____

(B)

Name: _____

Address: _____

Phone: _____ E-mail: _____

(C)

Name: _____

Address: _____

Phone: _____ E-mail: _____

II. Recommendation to continue as candidate for ordained ministry:

(A)

Name: _____

Address: _____

Phone: _____ E-mail: _____

(B)

Name: _____

Address: _____

Phone: _____ E-mail: _____

(C)

Name: _____

Address: _____

Phone: _____ E-mail: _____