

6.1201a Validated Ministry Annual Report.

I. Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____ E-Mail Address: _____

II. Ecclesiastical Status

_____ Ministry Validated by Presbytery part-time _____ full-time _____

* _____ Ministry directly related to PC(USA) part-time _____ full-time _____

_____ Ministry in ecumenical work accountable to a governing body of the PC(USA)

Part-time _____ full-time _____

_____ Ministry in interdenominational work, but not directly accountable for your ministry to the governing body of the PC(USA)

* Fill in items I and II only

III. Report on Employment from ____/____/____ to ____/____/____ (must be one year or less)

List all full or part-time positions held, whether secular or religious (including self-employment) from which income was earned.

Describe positions, give name and address of employing body or write "not so employed".