Presbytery of Coastal Carolina

Commissioned Ruling Elder's Annual Report

Name	Home Church	
Church of Service	Dates: (from	to)
Do you wish to continue to serve this congregation? _	yes; no; with some of	changes to terms.
Briefly answer the questions listed below. Additional	comments may be written of the b	ack of this form.
What are your major responsibilities in this congre	regation?	
2. What are the key ministry strengths you bring to t	this commission?	
3. What are the key accomplishments of this pastora	ıl relationship?	
4. What have been some of the challenges in this pas	storal relationship?	
5. In what areas of ministry could you use additional	l training and support?	
Note: Be sure to attach you Continuing Education Presbytery Office. Also, be sure that your Mentor	•	ou send to the
Signature	_	

Please return this form to:

Elder Ministries, Presbytery of Coastal Carolina, 807 West King Street, Elizabethtown, NC 28337, or scan and Email to: JanKrause@presbycc.org, or by FAX to: 855-899-7210.