



## Annual Information Review for UCC Authorized Ministers

"All authorized ministers are expected to participate in ... Information Reviews in order to maintain their authorization." (*United Church of Christ Manual on Ministry*) This document is a means for authorized ministers to participate in the Information Review in order to uphold the covenantal relationship with their Conferences and Associations.

Name: \_\_\_\_\_ Review Period (Year): \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Mobile Telephone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I prefer not to have my contact information listed in the Yearbook and Access UCC: \_\_\_\_

Current Ministry Setting: \_\_\_\_\_

Ministry Setting Address: \_\_\_\_\_

Position Title: \_\_\_\_\_ Date Service Began: \_\_\_\_\_

My local membership is with: \_\_\_\_\_  
(Name of Local Church)

I hold ministerial standing in: \_\_\_\_\_  
(Association and Conference)

Ministerial Standing: \_\_\_\_\_ Year Authorized in the UCC: \_\_\_\_\_

F = Full standing in the UCC (including commissioned, licensed, and ordained)

M = Ministerial Partner Standing (Disciples of Christ)

D = Dual Standing; identify the Denomination where standing is held: \_\_\_\_\_

C = Congregational Christian

S = Standing Suspended

**As you provide the above information, please highlight any information that represents a change. Complete and sign the reverse side of this review form, and return it to the Committee on Ministry, Conference and/or Association where you hold standing. The Conference office will relay any changes to the United Church of Christ national office.**

**Please respond honestly to the following prompts as part of your annual Information Review.**

1. Describe your primary responsibilities/functions in your present ministry setting(s).
  
2. List any continuing education experiences from this past year that have advanced your ministry skills.
  
3. Describe a formative event or practice of your faith/spiritual journey during this year.
  
4. Please identify the date, location, and topic/speaker of your most recently-attended boundary training: \_\_\_\_\_
  
5. How have you maintained your covenantal relationship with the United Church of Christ during the past year? Please check all that apply:
  - Attended an Association meeting.
  - Attended the annual meeting of my Conference.
  - Participated in OCWM and other special offerings of the UCC.
  - Attended General Synod as a visitor or delegate (voting/non-voting).
  - Served on an Association/Conference/national UCC committee or board.
  - Other: \_\_\_\_\_
  
6. Please check any of the following that apply to you:
  - I am planning to retire from active ministry on \_\_\_\_\_.
  - I would like to be part of a ministerial group/community of practice, *or* I already participate in such a group (please identify): \_\_\_\_\_
  - I would like time for conversation with my Committee on Ministry, Association Minister and/or Conference Minister.

**Please sign, date, and return this form to the appropriate Committee on the Ministry, Conference and/or Association where you hold ministerial standing.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Always contact your Association and/or Conference when:**

- ✓ Your call, address, or other contact information changes.
- ✓ You have personal or professional concerns and need support.