

# North Michigan District of The Wesleyan Church

**Vision:** *Empowering an expanding number of churches to be missionally healthy, to passionately transform diverse cultures for Christ. Transforming people through Christ*

**Mission:** *The North Michigan District of the Wesleyan Church exists to equip, enrich, administrate and communicate to pastors and laity in redemptive ways to accomplish the Great Commission*

## 2016-2017 Mid-Year Staff Pastor Report (Due November 15, 2016)

*Effective ministry comes about by a personal calling, commitment, passion, vision, mission and accountability. These reports are directed to helping North Michigan pastors to being healthy and productive in their calling and ministry. PRAISE GOD for all that is being done according to God's will and glory!*

NAME: \_\_\_\_\_

First 7 questions using 5-0 as a scale with 5–Awesome; 3–Going Okay; 0–Has Been Better

1. Spiritually my personal condition is \_\_\_\_\_. Comments \_\_\_\_\_

2. Physically my personal condition is \_\_\_\_\_. Comments \_\_\_\_\_

3. The condition of my marriage is \_\_\_\_\_. Comments \_\_\_\_\_

4. My personal financial condition is \_\_\_\_\_. Comments \_\_\_\_\_

5. My family relationship is \_\_\_\_\_. Comments \_\_\_\_\_

6. My relationship with my Lead Pastor is \_\_\_\_\_. Comments \_\_\_\_\_

7. My relationship with my church is \_\_\_\_\_. Comments \_\_\_\_\_

8. Names of people who have received Christ this May–Oct and list names: \_\_\_\_\_

\_\_\_\_\_

9. List one or more Outreach/Community events in your area of responsibility: \_\_\_\_\_

\_\_\_\_\_

10. Some other great things taking place in my area of responsibility are \_\_\_\_\_

\_\_\_\_\_

11. Areas of concern under my responsibility are \_\_\_\_\_

\_\_\_\_\_

12. I would like to make the following comments: \_\_\_\_\_

\_\_\_\_\_

13. I have the following prayer requests: \_\_\_\_\_

\_\_\_\_\_

14. Up to date contact information: e-mail \_\_\_\_\_ cell # \_\_\_\_\_

Regular Ministry Day and Times: \_\_\_\_\_

When I meet with my Lead Pastor: Day, time & frequency: \_\_\_\_\_

**Please return this completed form to the district office by November 15, 2016. Thank You!**

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