

# Instructions for filling out this form

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## Filling in the form

This form can be filled out and saved for later editing or printing. To fill out this form, position your pointer within a light blue field, click and begin typing. When you have completed a field, tab or click to the next. Periodically save your work (the first time you may be prompted to save with a different file name; you may name your file anything you want).



**Evangelical Lutheran Church in America**

God's work. Our hands.



**REPORT FOR MINISTER OF WORD AND SERVICE NOT UNDER CALL**

*Information on this form may be shared with other synod staff persons during the mobility process.*

Date: \_\_\_\_\_ Synod: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Commissioning or Consecration: \_\_\_\_\_  
Last 4 Digits Only

Home Mailing Address: _____		
City: _____	State: _____	Zip Code: _____ Country: _____
Phone: _____		Email: _____
Work Mailing Address: _____		
City: _____	State: _____	Zip Code: _____ Country: _____
Phone: _____		Fax: _____ Email: _____
Cell Phone: _____		
Preferred Mailing Address:	Work	Home:
Name of Spouse: _____	Date of Marriage: _____ (mm/dd/yyyy)	
Dependents (Full Name)	Relationship	Date of Birth (mm/dd/yyyy)
_____	_____	_____
_____	_____	_____
_____	_____	_____

1. Name and location of congregation of which you are a member:

\_\_\_\_\_ Congregation \_\_\_\_\_ City \_\_\_\_\_ State

In what congregational activities did you participate last year?

2. As you reflect upon the past year, what were the most significant developments, events, or accomplishments in your life?

3. Note any concerns or issues you desire to share with your synodical bishop.