

# ORDINATION REVIEW 2025

\_\_\_\_\_  
Ordained Minister

\_\_\_\_\_  
Congregation

\_\_\_\_\_  
District

Please complete and return this form to the District Executive/Minister of your district by \_\_\_\_\_. As you complete this form, please refer to the resource document included for more detailed information on the questions marked with \*. Please prayerfully study and remember the vows you took as you were ordained to the set-apart ministry in the Church of the Brethren and the accountability we have to Christ and one another for our ministry.

## A. Current Area of Ministerial Service\* (Check the Appropriate Box)

- 1. Pastor of a congregation
- 2. Person serving a congregation in a self-supporting ministry
- 3. Administrator or teacher in a theological seminary
- 4. Teacher of religion in a school, college, or university
- 5. Staff persons with districts, the denomination, and other Annual Conference Agencies
- 6. Missionary assigned to pastoral or evangelistic duties
- 7. Chaplain
- 8. Person serving in a specialized ministry (e.g., youth ministry, Christian education, camp administrator, ecumenical ministries, spiritual direction, pastoral counselors)
- 9. Ministers retired from their area of service\*
  - Fully retired (I am no longer active in any pastoral ministry - please complete only Sections C & G)
  - Active retired (I continue to serve in a pastoral capacity even if only sporadically - please complete Sections C, D, F, and G)

## B. Current Ministry Setting

\_\_\_\_\_  
Name of Ministry Setting: Congregation, Agency, or Institution

\_\_\_\_\_  
Address

## C. Membership

I am a member of the \_\_\_\_\_ Church of the Brethren.

## D. Ministerial Ethics

1. I have read the *Ethics in Ministry Relations* – 2008 paper.  Yes  No

2. I am willing to accept the *Ethics in Ministry Relations* requirements/procedures.  Yes  No

If no, please explain: \_\_\_\_\_

3. I attended a district sponsored and/or approved training event on ministerial ethics within the past five years: Date \_\_\_\_\_ Location \_\_\_\_\_

4. Has a formal complaint of ethical misconduct been filed against you in the past five years?

Yes  No

If yes, please explain the issue(s) and how it was resolved:

---

---

5. Have you ever been convicted of a felony or misdemeanor other than traffic offenses?

Yes  No

If yes, please explain:

---

---

**E. Continuing Education within the past five years\***

The *Guidelines for Continuing Education* adopted by Annual Conference in 2002 calls for a full-time ministerial leader to complete a minimum of five (5) CEUs (50 contact hours) in the 5 years leading up to ordination renewal. Continuing education for part-time, bi-vocational, and plural non-salaried ministers can be prorated.

- I have completed the required number of CEU's (prorated for part-time ministry) and documented them on the Church of the Brethren Continuing Education Report Form(s) attached.
- I will meet with the District Executive and a member of the Ministry Commission because I have not completed the required number of CEU's.

**F. Expectations of formation, training, practice, and accountability\***

I will follow the expectations for ordained ministers outlined in the *2014 Ministerial Leadership Paper* (see attached list).

\_\_\_\_\_

**G. My Desire (Check the appropriate boxes)**

After prayer and discernment, I desire to recommit myself to the work of Jesus Christ and to continue my ordination in the Church of the Brethren for another five years and continue to willingly commit myself to the vows I took at my ordination.\*

Before making this decision, I desire a conversation/meeting with the District Ministry Commission and/or District Executive to discuss and discern the continuation of my call as an ordained minister in the Church of the Brethren. My reasons: \_\_\_\_\_

---

I no longer sense a calling to the set-apart ministry and thereby request the termination\* of my ordination in the Church of the Brethren. My reasons: \_\_\_\_\_

---

To the best of my knowledge, the above responses are true and accurate.

Signed: \_\_\_\_\_

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

<i>District Office Use Only</i>
District Action: _____
District Executive: _____
Date: _____