District Committee on Ordained Ministry Action Report

From the _____ District Committee on Ministry of the Texas Annual Conference

*****Please complete the entire form*****

CANDIDATE INFORMATION

Full Name _____

Current Address _____ Current Phone _____

City _____State_____ Zip Code _____

Current Email Address _____

Seminary or College (Currently Attending) _____

Expected Graduation Date_____

Has she/he completed the Course of Study? Yes No

Attending Course of Study: Yes No If yes, number of Courses completed: _____

Mentor Report Received: Yes No Certified Mentor Name:_____

Certified Mentor Needed: Yes No Name of Clergy Mentor (Assigned by dCOM): _____

COMMITTEE ACTION

Certification
¶311.2

dCOM approves as certified candidate
Track: Elder Deacon Local Pastor *CLM
dCOM continues as exploring candidate
dCOM discontinues candidate

Recertification
¶312, 313

dCOM recertifies candidate
Track: Elder Deacon Local Pastor
dCOM discontinues candidate

Relicensing
¶319, 320

dCOM relicenses as local pastor
dCOM discontinues as local pastor & candidate

Commissioning
¶324.10

dCOM recommends for commissioning *(by required 3/4 majority vote)*
Track: Elder Deacon
dCOM continues as certified candidate
Track: Elder Deacon
dCOM discontinues candidate

OTHER ACTIONS, REQUIREMENTS, SUGGESTIONS, OR NOTES

You may note dCOM members present for actions taken or continue notes on back page.

Date _____ Signature_____

Approved signatures: **District Superintendent** or **Administrative Assistant**; **dCOM Chair** or **Registrar**

Please send a copy to your candidate, keep a copy for your dCOM records, and forward a copy to
Rev. Ben Burnside *at* **bburnside@txcumc.org**
***Please alphabetize forms by last name and groups (Recerts/Relicensing/Certified, etc.) prior to sending to Ben**