Northwestern Ohio Synod
Evangelical Lutheran Church in America

Congregational Registration Form
(Communal Discernment)

Every Christian has a baptismal call to ongoing discernment of God's activity in the world, in the Church, and in one's life. The primary purpose behind emphasizing a phase of discernment - normally with a rostered minister or mentor and a discernment team selected by the church council - is to assist applicants in reflecting upon aspects of their lives that might confirm a call to leadership. Some aspects worthy of consideration include an understanding of baptismal vocation, spirituality and prayer life, critical life experiences, relationship with the community of faith, significant life influences, and family of origin. You are asked to provide your understanding of the gifts and skills of the person named below. Thank you for your time and effort in providing a candid evaluation of this applicant.

Recommended Member Name: _____

Congregation (Discernment Community)

Name: _____

Address: _____ _____ _____ _____
                                                          city   state   postal code

Pastor: _____ **Synod:** _____

Congregational Membership

Date of applicant's membership in your congregation: _____
                                                                                    mm/dd/yyyy

Number of years as a member: _____

Please share a brief description of this person's participation in the life of your congregation including any specific areas of responsibility and service.

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Describe the process of discernment in which this person has been involved.

What is your assessment of this person's potential for leadership?

To your knowledge, are there any personal factors related to health and well-being that might be of concern if this person enters public ministry? Please be specific.

Describe any areas in which you believe this person might need specific guidance. Please be specific.

We hereby register this member of our congregation to be considered for Synod Authorized Ministry.

Council President: _____ **Date:** _____
mm/dd/yyyy

Pastor: _____ **Date:** _____
mm/dd/yyyy

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After saving the file, open the file from that location and begin filling in the form. Save the file often.

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