



THE PRESBYTERY OF MINNESOTA VALLEYS

MANUAL AND RESOURCE GUIDE

| |
|--|
| <p><i>SECTION 10</i> ACCOUNTABILITY: REPORTS AND FORMS</p> |
|--|

**NOTE: MANY OF THESE FORMS CAN BE FOUND IN OTHER SECTIONS OF THE MANUAL.
THEY ARE PLACED HERE FOR EASE OF ACCESS**

**COMMISSION ON LEADERSHIP MANUAL
SECTION 10: ACCOUNTABILITY: REPORTS AND FORMS**

CONTENTS

NOTE:

*** Denotes page number in this section.

Denotes other location within the Manual (Section – Page)

| | *** | # |
|---|------|-----|
| Table of Contents | 1002 | |
| Alternate Ordination Exam Request | 1003 | 220 |
| Pastoral Dissolution Agreement and Covenant of Closure | 1004 | 420 |
| Background Investigative Check Release | 1008 | 627 |
| Covenant for an Interim/Transitional Pastor | 1010 | 513 |
| Pastoral Call Form | 1012 | 631 |
| Appointment of an Administrative Commission for Ordination/Installation | 1014 | 637 |
| Report of an Administrative Commission for an Ordination/Installation | 1016 | 641 |
| Request by a Session for the Services of a Minister of Another Denomination | 1017 | 707 |
| Application by a Minister of Another Denomination to Provide Pastoral Services in the Presbytery of Minnesota Valleys | 1019 | 709 |
| Agreement to Abide by PCUSA Constitution and Be Subject to Presbytery Policies | 1025 | 715 |
| Appointed Moderator Report Form | 1026 | -- |
| Review of Temporary Pastoral Relationships | 1027 | -- |
| Annual Compensation, Benefits, and Education Report for Pastoral Leaders | 1029 | -- |
| Interim/Transitional Pastor's Report Form | 1032 | |
| Annual Report of Honorably Retired Ministers of the Word and Sacrament | 1034 | -- |
| Annual Report of Members-at-Large and Validated Ministries | 1036 | -- |
| Annual Report of Commissioned Pastors (also known as Commissioned Ruling Elders) | 1038 | 817 |
| Annual Manse Inspection Report | 1040 | 315 |
| Doctor of Ministry Assistance Fund Application | 1043 | 321 |

**COMMISSION ON LEADERSHIP
ALTERNATIVE ORDINATION EXAMINATION REQUEST
The Presbytery of Minnesota Valleys
*Approved May 2013***

I, _____, request that the Presbytery of Minnesota Valleys grant permission for me to take the _____ Standard Ordination Exam using the Presbytery approved alternative examination format.

(Name)

(Date)

Reason for requesting an alternate examination: (be specific including dates of failed exams)

COL use only:

Alternative Exam(s) scheduled for: _____

Alternative Examination Committee Members:

| | |
|--------------------|--------------------|
| _____ (COL) | _____ (COL) |
| _____ (Presbytery) | _____ (Presbytery) |
| _____ (Presbytery) | |

(Please circle the name of the COL member serving as committee moderator.)

**PASTORAL LEADER'S DISSOLUTION AGREEMENT and
COVENANT OF CLOSURE
Presbytery of Minnesota Valleys
Commission on Leadership**

Following the dissolution of a pastoral leader's relationship, it is important for the departing pastoral leader and the congregation to understand that all previous pastoral functions must cease. These functions include, but are not limited to: home, hospital, and nursing home visitation; personal counseling (including grief issues); and all liturgical functions such as preaching, weddings, baptisms and funerals. As per G-2.0905, former pastoral leadership shall not provide services to and with members of their former congregation without the invitation of the moderator of session. ***This Dissolution Agreement shall consider fairness to all parties involved, length of pastoral tenure and expedience of needed dissolution.***

Dissolution Agreement between _____ Presbyterian Church of _____

and (pastoral leader) _____. Length of relationship: _____

- Dissolution initiated by Pastoral Leadership
- Dissolution initiated by Congregation/Session
- Dissolution initiated by Presbytery of Minnesota Valleys

Dissolution Date (by which all pastoral functions are concluded): _____

Last Day in the Pulpit: _____ Last Day in the Church Building: _____

Last Day in the Manse (if applicable): _____

(Note specifics if any rent and/or utilities are required from the exiting leadership if the manse is not vacated by this date:

Salary (including Housing Allowance) to be paid through (date): _____ and/or any Termination Bonus Pay for pastoral leadership: \$_____. Note final payment date for these payments: _____. (All salaries paid and/or Termination Pay are part of Effective Salary and therefore shall be accompanied by Board of Pension dues for retirement and medical or other retirement payments.)

Pastoral Leadership _____ and his/her spouse (if applicable), the

_____ Church of _____, and the Commission on Leadership of the Presbytery of Minnesota Valleys, having discussed the intent and requirements of the following Presbytery policies regarding pastoral dissolution, agree to the following covenant.

Please note: There are no time limits to these responsibilities. They do not expire after a certain period of time has passed. **It is understood that this policy does not affect or require termination of friendships with individuals in the congregation, but these friendships must be carefully continued in the spirit of the following agreement.**

AGREEMENT- Departing Pastoral Leader

As of effective Dissolution Date, I understand and agree:

- When Presbytery dissolves the pastoral leader's relationship, all pastoral functions must cease.
- For the health of the congregation and its potential relationship with future pastoral leadership, it is necessary that the departing pastoral leader find a different congregation with which to worship. For the same reasons, if the spouse happens to be employed by the church as well, this relationship should terminate as of the effective Dissolution Date.
Possible exception: Special services of worship such as funerals, weddings, etc. as a congregant and not as one actively participating in the leadership of the service.
- Adult children of the former pastoral leader, who wish to continue membership in or worshipping with the congregation previously served by their parent/s, should consult with the new pastoral leadership and the Session as to the propriety of such a decision and abide by their advice.
- It is inappropriate to involve myself in any leadership or advisory role (public or private) in the congregation. This includes, but is not limited to: *commenting on potential persons for leadership; * intervening, supporting or giving advice to anyone involved in a congregational disagreement or dispute; * giving opinions or directions regarding church business that could undermine the transitions necessary for the church and the development of the relationship between the congregation and new pastoral leadership.
- It is inappropriate to officiate in any special event in the lives of former parishioners or of the congregation, including, but not limited to, weddings, funerals, baptisms, worship leadership, church anniversary activities, etc. unless expressly invited by the Moderator of the Session.
- Any request for pastoral services by a member of the congregation shall be declined and the member be referred to the current pastoral leadership. At no time, shall the former leader give any indication to the request that he/she would be glad to officiate if only the current leader would invite her/him. Such action is contrary to the spirit of this covenant.
- I will assure that all financial obligations within the community are completed so that the church will not be responsible to bear any burdens on my behalf.
- I will leave the church study and the manse, if applicable, in a clean and orderly fashion with all church belongings intact, returning all keys and removing all personal possessions no later than the date agreed upon. Any out of the ordinary repairs or cleaning shall be the responsibility of the departing person.
- I will authorize and notify the Board of Pensions, using "Service Change" Form ENR-110 or Board of Pension "Service Termination for Traditional Program Members: Form ENR-303, or any other updated change forms.

NOTE: Concerns or complaints regarding any of these issues shall be directed to the COL for resolution. If resolution is not reached, the matter shall be forwarded to the Stated Clerk of Presbytery. The Stated Clerk shall invite two or more members of COL to meet with the person

alleged to have been in violation. Should they find the complaints valid, and should the practice continue, the matter may be brought before the entire COL and subject to censure according to the “Rules of Discipline.”

AGREEMENT of the SESSION

On behalf of the congregation, the session shall serve as a guide by:

- Assuring the members of the congregation respect the terms of the Covenant as outlined.
- Interpreting the terms of the Covenant of Closure to the congregation. They shall clarify and help members understand the scope of the change in relationship that occurs when their Minister of the Word and Sacrament or Commissioned Pastor (also known as Commissioned Ruling Elder) is no longer in place. This may be particularly true when former leadership is elected to an Emeritus role. A person in that role is not exempted in any way from the terms of this Covenant.
- Instructing the congregation to not involve itself in the continuing ministry of the departed pastor.
- Assuring that any written and signed agreement is incorporated in the Session Minutes.
- Authorizing and notifying the appropriate entity to terminate benefit contributions paid out by the church as part of a former compensation and benefits package. If Board of Pensions (BOP), this will include “Service Change” Form ENR-110 or BOP “Service Termination for Traditional Program Members” Form ENR-301, or any other updated change forms. A copy will be made for the departing pastoral leader and we will be responsible for mailing or faxing completed forms to Board of Pensions.

AGREEMENT of the PRESBYTERY COMMISSION ON LEADERSHIP

On behalf of the Presbytery, the Commission on Leadership shall:

- Meet with and interpret the Covenant of Closure and its purpose to the Minister of the Word and Sacrament or Commissioned Pastor (also known as Commissioned Ruling Elder) prior to their departure as well as with the Session of the particular church.
- Be the Presbytery’s agent in reminding all parties of the principles agreed to in the Covenant of Closure. In the event any continued failure to live up to these principles is reported, compliance with the principles of the Covenant shall be enforced, as necessary.
- Be ready to assist any pastoral leader or Session struggling to understand or to adapt to this change of relationship.
- Be responsible for assuring all necessary signatures are received and copies of the completed Pastoral Dissolution Agreement and Covenant of Closure are distributed as follows:
 - Original copies in the appropriate pastoral leader’s file in the Presbytery Office
 - A copy to the departing Pastoral Leader
 - A copy to the Clerk of Session of the appropriate church

- A copy in the Church's file in the Presbytery Office

SIGNATURES:

_____ Date: _____
Departing Minister of the Word and Sacrament or
Commissioned Pastor (also known as Commissioned Ruling Elder)

_____ Date: _____
Spouse (if applicable)

_____ Date: _____
Clerk of Session

_____ Date: _____
Commission on Leadership Chair or Designee

Please return to:

**The Presbytery of Minnesota Valleys
4055 Abbott Drive SE
Willmar, MN 56201**

**Phone: 320-235-7910
FAX: 320-235-7539**

BACKGROUND INVESTIGATION CONSENT
The Presbytery of Minnesota Valleys

I, _____, hereby authorize the Presbytery of Minnesota Valleys and/or its agents to make an independent investigation of my background for criminal activity. This investigation may include criminal and police records, including those maintained by both public and private organizations and all public records, and include meeting the provisions of Minnesota Statute 604.20

I understand that this investigation is pursuant to policies adopted by the Presbytery of Minnesota Valleys and found in the presbytery's Manual of Operations. I further understand that this policy is a condition for continuing membership in the Presbytery of Minnesota Valleys.

I understand that adverse information regarding sexual misconduct, abuse, or child sexual abuse may result in disciplinary action against me.

I authorize the Presbytery of Minnesota Valleys to conduct a criminal background investigation of my history over the past ten years. I release the Presbytery of Minnesota Valleys and/or its agents and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits regarding the information obtained from any and all of the above referenced sources.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge.

Full Name (Printed)

Maiden Name or Other Names Used

Present Street Address

How Long?

City/State/Zip

Previous Street Address

How Long?

City/State/Zip

Date of Birth

Social Security

Driver's License

State

Expiration Date

Signed

Date

**THE PRESBYTERY OF MINNESOTA VALLEYS, PRESBYTERIAN CHURCH (USA)
A COVENANT BETWEEN A SESSION AND AN INTERIM OR
TRANSITIONAL PASTOR**

The following covenant between the session of _____ Presbyterian Church and _____ is for the purpose of providing interim/transitional pastoral services to the _____ Presbyterian Church of _____.

_____ will be the Interim/Transitional Pastor Interim/Transitional Associate Pastor of the _____ Presbyterian Church from _____ to _____ (not more than 12 months).

The Interim/Transitional Pastor (check the appropriate responses):

- Will become Is a member of the Presbytery of Minnesota Valleys
- Will Will not serve as Moderator of the Session.
- Will Will not serve as Head of Staff.

The Position Description for this position is attached to this covenant. The Position Description shall include the Five Tasks of an Interim/Transitional Pastor [Come to Terms with History through Conversation and Healing; Discover the Church's Identity; Empower Leadership of the Congregation; Affirm the Connectional Linkage as a Presbyterian Church; and Make New Commitments to the Future and New Leadership].

Please list key goals for this transitional period:

During the length of the agreement, _____ will be a member of, and accountable to, the Presbytery of Minnesota Valleys through quarterly reports to the Commission on Leadership (COL). At the end of the covenant, _____ Presbyterian Church agrees to provide a performance review.

The Rev. _____ affirms support for the doctrinal stance of the PC(USA) as found in the PC(USA) Book of Confessions, the system of government as found in the "Form of Government, worship as described in the "Directory of Worship" discipline as described in the Rules of Discipline and in general the mission and program of the PC(USA).

It is understood that the Rev. _____ has agreed not to be involved in any way with the Pastor Nominating Committee (PNC), except that trained interim/transitional pastors, in consultation with COL, may lead the congregation's mission study or other appropriate process. The Interim/Transitional Pastor will see that the PNC makes adequate reports. The Interim/Transitional Pastor will not assist in the preparation of the congregation's Ministry Information Form (MIF).

It is understood that _____ ordinarily will not be a candidate for the vacant pastoral office of _____ Presbyterian Church, and in every way, will seek to prepare the way for the coming of an installed pastor.

This covenant is for a period of up to _____ months (not more than twelve; G-2.0504b) from the date below. This covenant may be terminated by the session upon 30 days' written notice. The Interim/Transitional Pastor may terminate the covenant with 30 days' written notice and a forfeiture of any payment beyond the 30-day period (see NOTE below). This agreement may be extended with the approval of the Commission on Leadership.

Terms:

The Interim/Transitional Pastor is employed on a Full-Time Part-Time basis, serving approximately _____ hours per week, and will be compensated for pastoral services as follows (prorated as necessary).

| | | | |
|---|----|---------------------------|------------|
| Salary | \$ | Housing | \$ |
| Utilities | \$ | Social Security Allowance | \$ |
| Professional Expenses | \$ | Vacation | Four Weeks |
| Continuing Education | \$ | Study Leave | Two Weeks |
| Travel Expenses | \$ | Other | \$ |
| Other | \$ | | |
| Full Pension, Medical, Disability, and Death coverage under the Board of Pensions is required. Entering a specific amount is optional. \$ | | | |

NOTE:

All obligations, both of time and money, are to be used prior to the date of termination of the Covenant or forfeited on the date of termination of the Covenant unless previously approved by the Session and Commission on Leadership.

Approved by Action of the Session: Date _____

Signed: Moderator of the Session

Signed: Clerk of the Session

Signed: Interim/Transitional Pastor

Approved by Commission on Leadership: Date: _____

Signed: COL Chair, Presbytery of Minnesota Valleys

Signed: Stated Clerk of the Presbytery of Minnesota Valleys

THE PASTORAL CALL
 (For Pastor, Co-Pastor, Associate Pastor, Designated Pastor)
The Presbytery of Minnesota Valleys, Presbyterian Church (USA)

The _____ Presbyterian Church of _____ belonging to the Presbytery of Minnesota Valleys, being well satisfied with your qualification for ministry and confident that we have been led to you by the Holy Spirit as one whose service will be profitable to the spiritual interests of our church and fruitful for the Kingdom of our Lord, earnestly and solemnly calls you,

 (Name)

to undertake the office of _____ in this congregation, beginning _____, promising you in the discharge of your duty all proper support encouragement and allegiance in the Lord.

That you may be free to devote full-time (part-time) to the ministry of Word and Sacrament among us, we promise and obligate ourselves to pay you in regular monthly payments the following effective salary and following vouchered expenses (fill in those which are agreed to):

| | | | |
|----------------------------|----------|---|----------|
| Effective salary | | Reimbursable expenses (by voucher) | |
| Cash Salary | \$ _____ | Automobile expense (IRS rate) | \$ _____ |
| Fair rental value of manse | \$ _____ | Business/professional expenses | \$ _____ |
| Housing Allowance | \$ _____ | SECA Supplement (up to 50%) | \$ _____ |
| Utilities Allowance | \$ _____ | Continuing Education | \$ _____ |
| Deferred Compensation | \$ _____ | Other allowances | \$ _____ |
| Other allowances | \$ _____ | | |
| Total | \$ _____ | Moving Costs (up to) | \$ _____ |

Benefits

Full medical, pension, disability, and death benefit coverage under the Board of Pensions

Paid Vacation of _____ weeks annually, including Sundays (4 Weeks Minimum)

Paid Continuing Education of _____ weeks annually (2 Weeks Minimum), cumulative for three years maximum.

Paid maternity/paternity leave of 6 Weeks.

We further promise and obligate ourselves to review with you annually the adequacy of this compensation.

In the seventh year of service, the congregation will provide for a three-month Clergy Renewal Leave, continuing the salary and benefits for that period, and providing for pulpit supply in the pastor's absence.

In testimony, whereof we have subscribed our names this _____ day of _____, 20____.

Having moderated the congregational meeting which extended this call for ministerial services, I do certify that the call has been made in all respect according to the presbytery policy and the Form of Government, and that the persons who signed the foregoing call were authorized to do so by vote of the congregation.

Vote of the congregation at the meeting was _____ in favor of the candidate and _____ opposed.
(Signed) _____, moderator of the meeting

Certification of Call

A. Action by Presbytery of Call

1. The Presbytery of _____ has reviewed and approved this call.

Date of action _____ (Signed) _____

Stated Clerk or Authorized Signer

B. Action by the Minister's/Candidate's Presbytery

1. The Presbytery of _____ finds it expedient (not expedient) to release _____ to accept this call.

Date of action _____ (Signed) _____

Stated Clerk or Authorized Signer

C. Acceptance of the Call

This is to certify that I have received and accepted the call.

Date of action _____ (Signed) _____

Minister

Complete and sign three original copies. When all parties have signed, an original copy goes to 1) the minister, 2) the calling church, and 3) the presbytery of call

**APPOINTMENT OF AN ADMINISTRATIVE COMMISSION FOR
THE ORDINATION AND/OR INSTALLATION OF
A MINISTER OF THE WORD AND SACRAMENT
The Presbytery of Minnesota Valleys
*Updated August 2016 and July 2017***

This form or the information on this form needs to be sent to the chair of Commission on Leadership and receive approval from that body.

Candidate/Minister's Full Name _____

Date of Ordination/Installation Service _____ Time _____

Place of Ordination/Installation Service _____

Minister (Minister of the Word and Sacrament) Members of the Commission are (two or three):

| Name | Church Served | Position |
|-------|---------------|----------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Ruling Elder Members of the Commission are (must be from different congregations):

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Are all the recommended Commission members living within the bounds of the Presbytery of Minnesota Valleys? ____ Yes ____ No If no, give names and addresses of those who do not live in this presbytery.

Other Information:

Name of person providing the Ordination/Installation information

Telephone

Address/City/State/Zip Code/Email Address

Send to: Commission on Leadership Chair-person; see www.minnesotavalleys.org for contact information.

**REPORT OF AN ADMINISTRATIVE COMMISSION FOR
THE ORDINATION AND/OR INSTALLATION OF
A MINISTER OF THE WORD AND SACRAMENT
The Presbytery of Minnesota Valleys**

Date the Commission was appointed by Minnesota Valleys Presbytery _____

Moderator/Convener of the Commission _____

Date of the Commission meeting _____

Place of Commission meeting _____

Purpose of the Commission _____

Members of the Commission who were present:

Actions that were taken by the Commission:

NOTE: Be certain to include the action of RECOMMENDING TO PRESBYTERY the dismissal of the Commission.

Signed _____

**REQUEST BY A SESSION FOR THE SERVICES OF A
MINISTER OF ANOTHER DENOMINATION
Presbytery of Minnesota Valleys**

NAME OF CHURCH _____

ADDRESS, CITY, ZIP _____

CHURCH PHONE: _____

E-MAIL: _____

CLERK OF SESSION _____

ADDRESS, CITY, ZIP _____

PHONE: _____

E-MAIL: _____

MODERATOR OF SESSION _____

ADDRESS, CITY, ZIP _____

PHONE: _____

E-MAIL: _____

PREVIOUS PASTOR/COMMISSIONED PASTOR/Temporary Supply:

Is the Church Seeking a Permanent Pastor? _____ (yes/no)

Is a Pastor Nominating Committee in Place? _____ (yes/no)

NAME OF MINISTER REQUESTED _____

ADDRESS, CITY, ZIP _____

PHONE AND E-MAIL: _____

Denomination of Minister _____

Please describe what services the church is seeking from this minister:

Anticipated Length of Service: _____

(Note: The Commission on Leadership will approve such relationships for no more than one (1) year in length. Relationships may be renewed on an annual basis.)

Effective Start Date of Relationship: _____

Does the Session desire this person to administer the Sacraments of Baptism and the Lord's Supper?
_____ (yes/no)

Has the Commission on Leadership liaison counseled with the Session concerning this?
Relationship? _____ (yes/no)

This request was officially approved at a regularly constituted meeting of the Session of the
_____ Presbyterian Church, held on _____.

MODERATOR

CLERK OF SESSION

**APPLICATION FOR A MINISTER OF ANOTHER DENOMINATION
TO PROVIDE PASTORAL SERVICE WITHIN THE
PRESBYTERY OF MINNESOTA VALLEYS**

I. GENERAL INFORMATION

Name _____
(Last Name) (First Name) (Middle Name)

Street Address _____

City _____ State _____ Zip Code _____

Preferred Phone _____ Alternate Phone _____

E-mail _____ Fax _____

Ecclesiastical Status:

Denomination of Membership: _____

Name and Phone Number of Contact in Denominational District:

Ordained _____ Licensed _____ (Please attach copy of Ordination Certificate.)

Ordination Date: _____/_____/_____/ (Month/Day/Year)

Church Membership: (if applicable)

Name of church of membership: _____

Street Address: _____

City & State: _____

Formal Education: (College and Seminary. Please attach copies of all degrees)

| College/Seminary | Dates Attended | Degree Conferred |
|------------------|----------------|------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Work experience you have: (Please select only one)

- First Ordained Call 0 to 2 years 2 to 4 years
 4 to 6 years 6 to 8 years 8 years or more

Please list your work experience: *(Please include position title, city, state, church size, community type, and dates from/to or number of years. Or attach resume)*

Please enter references here:

| | <u>Name</u> | <u>Relation to you</u> | <u>Phone</u> | <u>Address</u> | <u>E-Mail</u> |
|----|-------------|------------------------|--------------|----------------|---------------|
| 1. | _____ | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ | _____ |

4. _____

5. _____

6. _____

_____ I hereby authorize those inquiring into my suitability to contact my references.

Signature _____

Print Name _____

Date _____

II. DETAILED INFORMATION

(Please respond on separate sheets of paper and attach to this application)

1. Briefly describe your reasons/motivations for seeking this position.
2. List and describe your previous affiliation with the Presbyterian Church (U.S.A.).
3. Explain any differences in the theology and conduct of corporate worship between the denomination to which you belong and that of the Presbyterian Church (U.S.A.) in the Reformed tradition.
4. Explain your understanding of the sacrament of baptism, including the role of the parents and congregation in the baptism of an infant. Please comment on any differences between your denomination's understanding and theology of baptism and that of the Presbyterian Church (U.S.A.) in the Reformed tradition.
5. Explain your understanding of the sacrament of the Lord's Supper. Please comment on any differences between your denomination's understanding and theology of the Lord's Supper and that of the Presbyterian Church (U.S.A.) in the Reformed tradition.
6. A two page, single-spaced paper setting forth the Minister-Candidate's own theological orientation, her/his spiritual pilgrimage, and her/his understanding of and call to ordained ministry, and
7. A two page, single-spaced paper summarizing the most salient features (in contrast to the Minister-Candidate's own denomination) of the history, theological roots, polity, and practice of the Presbyterian Church, USA.

III. SEXUAL MISCONDUCT SELF CERTIFICATION

The following information related to sexual misconduct was mandated by the Sexual Misconduct Policy and Its Procedures adopted by the 203rd General Assembly (1991), and was revised by the 205th General Assembly (1993).

Please check one of the following:

___ I certify below that no civil, criminal, ecclesiastical complaint has ever been sustained* or is pending* against me for sexual misconduct; and I have never resigned or been terminated from a position for reasons related to sexual misconduct.

___ I am unable to make the above certification. I offer, instead, the following description of the complaint, termination, or the outcome of the situation with explanatory comments.

The information contained in this application is accurate to the best of my knowledge and may be verified by the employing entity. I hereby authorize Minnesota Valley Presbytery to inquire concerning any civil or criminal records, or any judicial proceeding involving me as a defendant, related to sexual misconduct. By means of this release I also authorize any previous employer, and any law enforcement agencies or judicial authorities or ecclesiastical governing bodies to release any and all requested relevant information related to sexual misconduct to Minnesota Valley Presbytery.

_____ I have read this certification and release form and fully understand that the information obtained may be used to deny my employment or any other type of position from the employing entity. I also agree that I will hold harmless the employing or judicial authority or any other entity from any and all claims, liabilities, and causes of action for the legitimate release of any information related to sexual misconduct.

Signature _____

Print Name _____

Date _____

- * ***Sustained***
 - In a criminal court, "sustained" means that there has been a guilty plea, a guilty verdict or a plea bargain.
 - In a civil court, "sustained" means that there has been a judgement against the defendant.
 - In an ecclesiastical case, "sustained" means that there has been a guilty plea and censure imposed, or finding of guilty with censure imposed, by a permanent judgement judicial commission in the Presbyterian Church (USA) or an equivalent body of another church.

- * ***Pending***
 - In a criminal court, "pending" means a criminal charge before a grand jury, in the process of being prosecuted, or in a case which there is not yet a verdict.
 - In a civil court, "pending" means a case in which there has not been a decision or judgement,
 - In an ecclesiastical case, "pending" means an accusation is being investigated by a special disciplinary committee or charges have been filed but have not been decided by a permanent judicial commission; or an accusation or charges are in an equivalent state or process in a church other than the PC (USA).

(The following is taken from definitions in the General Assembly Sexual Misconduct Policy and its Procedures, Pg.13)"Sexual Misconduct is the comprehensive term used in this policy and its procedures to include: 1) Child sexual abuse, as defined above [refers to Policy]; 2) Sexual harassment, as defined above [refers to Policy]; 3) Rape or sexual contact by force, threat, or intimidation; 4) Sexual conduct (such as offensive, obscene or suggestive language or behavior, unacceptable visual contact, unwelcome touching or fondling) that is injurious to the physical or emotional health of another; 5) Sexual Malfeasance defined as sexual conduct within a ministerial (e.g. clergy with a member of the congregation) or professional relationship (e.g. counselor with a client, lay employee with a church member, presbytery executive with a committee member who may be a layperson, a minister, or an elder). Sexual conduct includes unwelcome sexual advances, request for sexual favors, and verbal or physical conduct of a sexual nature. This definition is not meant to cover relationships between spouses, nor is it meant to restrict church professionals from having normal, social, intimate, or marital relationships; 6) Sexual Abuse as found in Book of Order D-10.0401b (see Accuser/Victim)

**AGREEMENT TO ABIDE BY AND BE SUBJECT
TO THE PRESBYTERIAN CHURCH (USA) CONSTITUTION
AND PRESBYTERY'S POLICIES**

As a non-Presbyterian minister/pastoral leader serving in a ministerial capacity in a Presbyterian congregation, I agree to the extent that I am not prohibited by my conscience or the official doctrine of my denomination, while I am serving a church within the Presbytery of Minnesota Valleys, to abide by and be subject to the Constitution of the Presbyterian Church (U.S.A.) (*Book of Confessions, Form of Government, Directory for Worship, and Rules of Discipline*) and the policies of the Presbytery of Minnesota Valleys as contained in the presbytery Manual of Operations, and as may be adopted by the Presbytery. I hereby authorize the Presbytery of Minnesota Valleys to work with my ecclesiastical body of membership regarding disciplinary action, of any kind, involving me.

Signature _____

Date _____

APPOINTED MODERATOR REPORTING FORM
The Presbytery of Minnesota Valleys

Date _____

Report # _____

Congregation _____ City _____

Moderator _____ Phone _____

1. The good news in this congregation is:

2. The challenges, as I see them, are:

3. Resources from the presbytery that might be helpful for this congregation are:

4. I feel Commission on Leadership needs to be aware of:

5. For congregations in an Interim/Transitional period: Are efforts being made to deal with any of the following interim developmental tasks? (Use the reverse side for additional comments.)

- Coming to terms with history
- Discovering a new identity
- Allowing new leadership change
- Renewing denominational linkages
- Commitment to new directions in ministry

This report is to be submitted annually to Commission on Leadership through the presbytery office.

REVIEW OF TEMPORARY PASTORAL RELATIONS (G-2.0504b)
The Presbytery of Minnesota Valleys

Name of Temporary Pastoral Supply _____ Date Began _____

Church _____ City _____

1. List three generally accepted strong points of the person providing temporary pastoral supply:

A.

B.

C.

Additional comments:

2. List areas where the temporary pastoral supply might improve:

3. Please comment on the following (use other side of this sheet, if necessary):

A. Preaching:

B. Visitation:

C. Leadership:

D. Personal Relationships:

E. Administration:

The session recommends does not recommend that the _____
relationship be continued for another year.

The temporary pastoral supply requests does not request that the _____
relationship be continued for another year.

Signed by direction of the Session:

Clerk of Session _____

Temporary Pastoral Supply _____

Date _____

January 2002

**PRESBYTERY OF MINNESOTA VALLEYS
ANNUAL COMPENSATION, BENEFITS, AND EDUCATION REPORT FOR PASTORAL LEADERS
2017**

This form must be completed and returned to the Presbytery Office no later than March 1, 2017

Name of Minister of the Word and Sacrament or Commissioned Pastor _____

Position Title _____ Year of Ordination/Commissioning _____

Congregation/Ministry Served _____ City _____

Full-Time _____ Part-Time _____ (Number of Hours/Week) _____

Congregational Membership (December 31, 2016) _____ Average Worship Attendance _____

EFFECTIVE SALARY:

1. \$ _____ **Cash Salary**
Includes employee contributions to 403(b)(9) plans; tax-sheltered annuity plans; unvouchered professional, travel, and study allowances; vacation pay and overtime.
2. \$ _____ **Housing Allowance**, including utilities, and furnishings allowances
3. \$ _____ **Employing Organization Contributions**
Includes 403(b)(9) plans, tax-sheltered annuity plans and equity allowances. Matching contributions to the Board of Pensions Retirement Savings Plan should not be included.
4. \$ _____ **SECA** (for reimbursements in excess of 50% of the Minister of the Word and Sacrament's SECA tax obligation)
5. \$ _____ **Other Allowances** (includes co-payment and medical expense reimbursement allowances)
6. \$ _____ **Manse Amount** (must be at least 30% of lines 1-6 for members residing in a manse)
7. \$ _____ **TOTAL EFFECTIVE SALARY** (sum of lines 1-6) for Board of Pensions calculations

OTHER SALARY:

8. \$ _____ **Group Plans** for medical deductible, co-insurance, dental premium (other than Board of Pensions)
9. \$ _____ **SECA Tax Allowance** (only up to 50% of estimated obligation)
10. \$ _____ **Employing Organization Contributions – Match to Board of Pensions Retirement Savings Plan**
11. \$ _____ **TOTAL COMPENSATION** (Total of 7-10)

PROFESSIONAL EXPENSES (Vouchered):

12. \$ _____ **Auto, Business, and Professional Expenses** (mileage at current IRS rate)
13. \$ _____ **Continuing Education Reimbursements** (\$750 per year minimum)
14. \$ _____ **Other:** _____
15. \$ _____ **TOTAL PROFESSIONAL EXPENSES**

SUMMARY OF REQUIRED MINIMUM TERMS OF CALL FOR FULL TIME MINISTERS OF THE WORD AND SACRAMENT:

- 16. **2017 Minimum Compensation** – Please refer to the approved presbytery guidelines
- 17. **Vacation** **4 Weeks** per Year (Minimum)
- 18. **Continuing Ed** **2 weeks** per Year Minimum, time *and unused funds accruable up to three years*
- 19. **Pension** Based on Total Effective Salary (Line 7 above)
 - Pastor Participation: 12% pension/death/disability
24.5% medical
 - Other Pastor Participation: 11% pension / 1% death and disability
Medical varies (consult Board of Pensions)
- 20. **Health and Medical Leave:** **Up to 10 compensated days** annually; *cumulative to 90 days*
- 21. **Emergency Leader:** **Maximum of 5 days** annually (see Compensation and Benefits Guidelines for specific details)

RECOMMENDED BY ACTION OF PRESBYTERY

- 22. **Sabbatical:** **3 months compensated leave** for Ministers of the Word and Sacrament after six years of service
- 23. **DAYS OFF** Ministers of the Word and Sacrament are encouraged to take two days off per week, with at least one full, uninterrupted day off per week. When there has been an unusually heavy work week, Ministers of the Word and Sacrament are encouraged to take an extra day off during the next week to compensate. This is not considered a vacation day.

Please remember that the Board of Pensions Form ENR-111 must also be completed and submitted to the Board every time there is a change in Effective Salary.

CLERK OF SESSION – PLEASE COMPLETE:

The TERMS OF CALL for 2017 were approved at a Congregational Meeting held on (Date)_____.

Signed – Clerk of Session

Date

MINISTER OF THE WORD AND SACRAMENT/COMMISSIONED PASTOR – PLEASE COMPLETE:

My terms of call were reviewed with me by the personnel committee or session.

YES NO

I have I have not accepted the terms reported above.

Do you wish to have a consultation with representatives of the Commission on Leadership regarding your call?

YES NO

Signed – Minister of the Word and Sacrament/Commissioned Pastor

Date

PASTORAL LEADER'S ANNUAL REPORT

VACATION 2016: Number of days GRANTED _____; Number of days USED _____
Number of days CARRIED OVER, if permitted _____

CONTINUING EDUCATION 2016: Number of days AVAILABLE in 2016 _____
Number of days USED _____
Number of days CARRIED OVER _____
Number of days AVAILABLE in 2017 _____

CONTINUING EDUCATION EVENTS ATTENDED:

CONTINUING EDUCATION FUNDS USED IN 2016: \$ _____

CONTINUING EDUCATION FUNDS CARRIED OVER: \$ _____

CONTINUING EDUCATION FUNDS AVAILABLE IN 2017 \$ _____

HEALTH AND MEDICAL LEAVE PROVIDED IN 2016? Yes _____ No _____

HEALTH AND MEDICAL LEAVE USED IN 2016? Number of Days _____

Presbytery policy states that Minister of the Word and Sacrament members and Commissioned Pastors (also known as Commissioned Ruling Elders) are entitled to up to ten working days of paid sick leave each calendar year cumulative up to ninety days.

EMERGENCY LEAVE – Are you and your Session aware of the Presbytery Policy regarding Emergency Leave?

Yes _____ No _____

PRESBYTERY SABBATICAL POLICY – Are you and your Session aware of the Presbytery's Sabbatical Policy?

Yes _____ No _____ In what year would you be eligible for a sabbatical? _____

INTERIM/TRANSITIONAL PASTOR REPORTING FORM
The Presbytery of Minnesota Valleys

To be submitted quarterly to the Chair-person of the Commission on Leadership

Name _____ Date _____

Congregation _____ Phone _____

1. Good News:

2. Challenges:

3. Progress in regard to the Developmental Tasks:

- a. Coming to terms with history
- b. Seeking a new identity
- c. Facilitation shifts in leadership
- d. Renewing denominational linkages
- e. Commitment to new leadership and the future

4. Resources needed from the presbytery

5. What does the Commission on Leadership need to know?

**HONORABLY RETIRED MINISTERS ANNUAL REPORT TO PRESBYTERY
Presbytery of Minnesota Valleys**

***Please return to the presbytery office, 4055 Abbott Drive, Willmar, MN 56201,
on or before February 1***

Report for Calendar Year _____

Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

Ministries which you have performed during the past calendar year which you wish to report to presbytery:

In what ways has the presbytery been helpful to you?

In what ways, can the presbytery be helpful to you?

In what ways are you actively related to the life and work of a particular church?

Signature _____

ANNUAL REPORT BY MEMBERS-AT-LARGE OR VALIDATED MINISTERS
The Presbytery of Minnesota Valleys

NOTE: Members-at-Large and Ministers of the Word and Sacrament in Validated Ministries of the Presbytery:

It is your responsibility in filling out this form to describe the way in which the ministry which you are performing fulfills all of the criteria which have been set forth in the Form of Government. It will be most helpful for your presbytery's Commission on Leadership if you use detail in describing the objectives of your ministry and the fashion in which that ministry is conducted.

**To be returned to the presbytery office, 4055 Abbott Drive, Willmar, MN 56201
on or before February 1**

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Email: _____

1. Describe your employment during the past year (list all full-time or part-time positions held, whether secular or religious, including self-employment for which income was earned), or write "not employed."

2. Your report on your activities of religious or ecclesiastical nature:
 - a. In what ways have you been active in the life and work of the presbytery?
(List specific responsibilities and how they have been filled.)

b. In what ways are you actively related to the life and work of a particular church (e.g., Parish Associate)?

3. In what ways can presbytery be helpful to you?

Signature: _____

Date Completed: _____

COMMISSIONED PASTOR ANNUAL REPORT
The Presbytery of Minnesota Valleys

(Note: The session must act annually to renew this Commissioned Pastor relationship on the anniversary of the original action. The action by session must be reported to the Commission on Leadership, and this form must accompany the report of session action.)

Name of COMMISSIONED PASTOR _____

Church served _____

Name of clerk of session _____

Name of mentor _____

Date of report _____

1. Key ministry strengths of the Commissioned Pastor:

2. Accomplishments in this ministry:

3. Challenges in this ministry:

4. Areas where the Commissioned Pastor could use additional training, support, or other assistance:

5. Is there anything else the Commission on Leadership should be aware of?

_____ The CP and congregation desire to continue in this pastoral relationship

_____ The CP and mentor desire to continue in this covenant relationship

_____ COL should schedule a face-to-face meeting with this CP

Signature of Commissioned Pastor _____

Signature of Clerk of Session _____

Signature of Mentor _____

**ANNUAL MANSE INSPECTION FORM
THE PRESBYTERY OF MINNESOTA VALLEYS**

(Please complete and return to the Presbytery Office, 4055 Abbott Drive, Willmar, MN 56201 by February 1)

Church Name _____ Date _____

Manse Address _____

Person completing form _____

Please indicate in the space provided (A) = adequate, or (N) = attention needed.

| | | | | |
|--------------------------------|-----------------|---------------|----------------|----------|
| 1. Space for Pastor and family | | | | |
| | | | | |
| 2. Interior: | Paint/Wallpaper | Floors/Carpet | Interior Doors | Comments |
| Living Room | | | | |
| Dining Room | | | | |
| Family Room | | | | |
| Bedroom #1 | | | | |
| Bedroom #2 | | | | |
| Bedroom #3 | | | | |
| Bedroom #4 | | | | |
| Utility Room, Washer, Dryer | | | | |
| Add'l Room #1 | | | | |
| Add'l Room #2 | | | | |
| Add'l Room #3 | | | | |
| Comments | | | | |
| | | | | |

| | | | | | | | | | | | | | | |
|--|----|----|----|----------|--|----|----|----|----------|--|--|--|--|--|
| 3. Kitchen | | | | | | | | | | | | | | |
| A. Cabinets | | | | | | | | | | | | | | |
| B. Counter Tops | | | | | | | | | | | | | | |
| C. Sink/Disposal/Plumbing | | | | | | | | | | | | | | |
| D. Refrigerator, Stove, Dishwasher, Microwave | | | | | | | | | | | | | | |
| E. Floor Covering | | | | | | | | | | | | | | |
| F. Lighting | | | | | | | | | | | | | | |
| G. Other (please list) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| <table> <tr> <td style="width: 25%;"></td> <td style="width: 12.5%;">#1</td> <td style="width: 12.5%;">#2</td> <td style="width: 12.5%;">#3</td> <td style="width: 37.5%;">Comments</td> </tr> <tr> <td colspan="5" style="height: 80px;"></td> </tr> </table> | | | | | | #1 | #2 | #3 | Comments | | | | | |
| | #1 | #2 | #3 | Comments | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 4. Bathroom(s) | | | | | | | | | | | | | | |
| A. Bathtub/Shower | | | | | | | | | | | | | | |
| B. Commode | | | | | | | | | | | | | | |
| C. Sink/Vanity | | | | | | | | | | | | | | |
| D. Plumbing | | | | | | | | | | | | | | |
| E. Caulking/Grout/Walls/Floor/Door | | | | | | | | | | | | | | |
| Comments | | | | | | | | | | | | | | |

| |
|---|
| 5. Heating and Cooling |
| A. Furnace |
| B. Air Conditioning |
| C. Insulation |
| |
| 6. Building Exterior |
| A. Paint |
| B. Roof/Soffit /Fascia/Guttering and Downspouts |
| C. Window Screens/Storm Windows, Caulking |
| D. Doors (Storm/Screen) |
| |
| 7. Foundation and Masonry |
| A. Window Wells |
| B. Garage or Storage Building |
| |
| 8. Grounds of Manse |
| A. Driveway/Sidewalks |
| B. Outdoor Lighting |
| C. Trees/Landscaping |
| |
| 9. Other problems/issues noted: |
| |
| |
| |
| |
| |

**PRESBYTERY OF MINNESOTA VALLEYS
DOCTOR OF MINISTRY ASSISTANCE FUND
Application**

(Completed form must be submitted to the Commission on Leadership, in care of the presbytery office.)

Minister of the Word and Sacrament's Name _____

Church Name _____ Date _____

Address _____

City, State, Zip Code _____

Phone _____

Request for D. Min Assistance \$ _____

Date of Session approval _____

Date training began _____ Name & Location of Training _____

Church's contribution \$ _____.

Describe how the church has or will raise these funds:

Clerk of Session -- Signature and Date: _____

Minister of the Word and Sacrament -- Signature and Date: _____

COL Authorized Signature and Date: _____