ANNUAL REPORT of MINISTERIAL FUNCTION

This report is completed by 1) all non-parochial clergy, 2) all Pittsburgh clergy ministering beyond the diocese, and 3) all clergy desiring a License to Function in a Pittsburgh Parish.

Name(Current Occupation	
Mailing address		
Email address (primary)		
Congregation where you regularly worship		
Please indicate the number of services of each iter	m:	
	Officiant	Assisted
Holy Communion		
Choir Offices		
Baptisms		
Marriages		
Funerals		
The above services were primarily recorded in the register of [church / location]:	e service book, an	d if appropriate, in the parish
If not recorded, please make appropriate comments in the	"Additional Remari	ks" section on page 2.
Other ways in which you are currently exercising	your ministry:	
Date of Ministry Safe Sexual Awareness Training:		
Date of Oxford Background Report (or the equiv	alent):	

f you are secularly employed, please describe that work.		
n a short paragraph, please describe where you have so	een growth or change in your life with the	
ord.		
Additional Remarks:		
Signature	Data	
Signature	Date	