



Annual Report of Ministerial Function

Date: _____

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 Congregation.

Name: _____ Current Occupation: _____

Mailing address: _____

Email address (primary): _____

Date of most recent MinistrySafe Sexual Abuse Awareness Training completion: _____

Date of most recent Oxford Background Report (or the equivalent) completion: _____

Congregation where you regularly worship: _____

Please indicate the number of services of each item:

| | Officiant | Assisted |
|----------------|-----------|----------|
| Holy Communion | _____ | _____ |
| Choir Offices | _____ | _____ |
| Baptisms | _____ | _____ |
| Marriages | _____ | _____ |
| Funerals | _____ | _____ |

The above services were primarily recorded in the service book, and if appropriate, in the parish register of [church / location]:

If not recorded, please make appropriate comments in the "Additional Remarks" section on page 2.

Other ways in which you are currently exercising your ministry:

In a short paragraph, please describe the nature of your ministry and its relation to the church.

If you are secularly employed, please describe that work.

In a short paragraph, please describe where you have seen growth or change in your life with the Lord.

Additional Remarks:

Signature

Date