



## UPPER MIDWEST CONFERENCE

### Certified Lay Minister Certification Process Checklist

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone/s: \_\_\_\_\_ E-mail: \_\_\_\_\_

Church Membership: \_\_\_\_\_

#### Certification—¶402. TBOD

\_\_\_\_\_ Professing member of a local Global Methodist Church (or its predecessor) for at least two years.

\_\_\_\_\_ Satisfactory completion of a course in lay ministry, approved by the Commission on Higher Education and Ministry, covering the church's doctrine, history, polity, and basic Bible knowledge as follows:

\_\_\_\_\_ Global Methodist History, Polity, Theology

\_\_\_\_\_ Congregational Care and Ethics

\_\_\_\_\_ Mission and Evangelism

\_\_\_\_\_ Understanding the Call; Spiritual Gifts

\_\_\_\_\_ Basic Bible Training

\_\_\_\_\_ Satisfactory completion of at least one advanced course in lay ministry, approved by the Commission on Higher Education and Ministry, on an area of ministry (e.g., preaching worship, leading, caring ministry, etc.) Coursework or training in other settings may be counted to meet this requirement at the discretion of the board of ministry.

\_\_\_\_\_ Course completed and date of completion

\_\_\_\_\_ National background check.

\_\_\_\_\_ Written recommendation by the pastor and endorsement by majority vote of the pastor-parish relations committee and charge conference.

\_\_\_\_\_ Interview and approval by the annual conference board of ministry.

Recommended for certification by Upper Midwest BOM: \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, state reason(s): \_\_\_\_\_

Date: \_\_\_\_\_ BOM Chair: \_\_\_\_\_

### **Recertification—¶402. TBOD (Required every 3 years)**

\_\_\_\_\_ Submitted an annual report to charge conference and annual conference board of ministry outlining what ministry had been done during the year and giving evidence of satisfactory performance.

\_\_\_\_\_ Endorsement by majority vote of the charge conference annually.

\_\_\_\_\_ Year One \_\_\_\_\_ Year Two \_\_\_\_\_ Year Three

\_\_\_\_\_ Written recommendation for renewal by the pastor.

\_\_\_\_\_ Obtained recommendation for recertification from presiding elder.

\_\_\_\_\_ Completion of an additional national background check every three years.

\_\_\_\_\_ Satisfactory completion of at least one additional course in lay ministry, approved by the Commission on Higher Education and Ministry, in the last three years.

\_\_\_\_\_ Interviewed with BOM for recommendation of recertification.

Recommended for recertification by Upper Midwest BOM: \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, state reason(s): \_\_\_\_\_

Date: \_\_\_\_\_ BOM Chair: \_\_\_\_\_



**CERTIFIED LAY MINISTER**  
Upper Midwest Board of Ministry  
**RECOMMENDATION FORM**  
**For Certification**

Name: \_\_\_\_\_ Name of Church: \_\_\_\_\_

Address: \_\_\_\_\_ Church Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ District: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Recommendation of Pastor and Pastor-Parish Relations Committee**

We recommend this person to be certified as a lay minister.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
(Pastor)

District: \_\_\_\_\_

**Recommendation of Charge Conference**

The charge conference of \_\_\_\_\_ Church  
recommends

\_\_\_\_\_ be certified as a lay minister.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
(Chair of the Church Council/Administrative Board)

Date: \_\_\_\_\_ Signed: \_\_\_\_\_  
(Presiding Elder)

**NOTE: If recommendations cannot be made, please do not sign the form, but indicate reasons why you do not recommend this person be certified as a CLM.**

COMMENTS:



**CERTIFIED LAY MINISTER**  
Upper Midwest Board of Ministry  
**RECOMMENDATION FORM**  
**For Re-Certification**

Name: \_\_\_\_\_ Name of Church: \_\_\_\_\_

Address: \_\_\_\_\_ Church Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ District: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Recommendation of Pastor and Pastor-Parish Relations Committee**

We recommend this person to be re-certified as a lay minister.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

(Pastor)

District: \_\_\_\_\_

**Recommendation of Charge Conference**

The charge conference of \_\_\_\_\_ Church

recommends \_\_\_\_\_ be re-certified as a lay

minister.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

(Chair of the Church Council/Administrative Board)

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

(Presiding Elder)

**NOTE: If recommendations cannot be made, please do not sign the form, but indicate reasons why you do not recommend this person be certified as a CLM.**

COMMENTS: