

(CP) COMMISSIONED PASTOR

Presbytery of Sheppards and Lapsley

www.psllcusa.org

CP ANNUAL REPORT

NAME _____ DATE _____

COMMISSIONED TO _____ CHURCH

NUMBER OF TIMES PREACHED _____

NUMBER OF TIMES SERVED THE LORD'S SUPPER _____

NUMBER OF BAPTISMS _____

NUMBER OF WEDDINGS _____

IF YOUR SCHEDULE ALLOWS, HAVE YOU ATTENDED PRESBYTERY MEETINGS? _____

BRIEFLY DESCRIBE YOUR TYPICAL WEEK SERVING AT THE CHURCH:

PLEASE SHARE ANY CONCERNS YOU HAVE ABOUT THE HEALTH OF THE CONGREGATION:

PLEASE SHARE THE JOYS YOU HAVE EXPERIENCED WITH THE CONGREGATION:

CONTINUING EDUCATION

ATTENDED PRESBYTERY-SPONSORED EVENT _____

OTHER EDUCATIONAL EVENTS ATTENDED _____

*NAME OF MENTOR (This must be an ordained PCUSA pastor.) _____

MENTOR'S CHURCH OR OTHER AFFILIATION _____

HOW OFTEN DID YOU HAVE A CONNECTION WITH YOUR MENTOR TO DISCUSS
YOUR COMMISSIONED SERVICE? _____

DO YOU FIND THIS RELATIONSHIP HELPFUL? WHY OR WHY NOT?

**IF YOU DO NOT HAVE A MENTOR, PLEASE CONTACT JOHN AND SHARON. WE WILL
HELP GET YOU SET UP WITH SOMEONE.*

WOULD YOU BE INTERESTED IN JOINING A COHORT OF YOUR FELLOW CPs FOR A
REGULAR TIME OF STUDY AND CONVERSATION? _____

IF SO, PLEASE CONTACT DAVID LYONS AT: david.r.lyons@gmail.com.

BRIEFLY SHARE HOW YOU THINK THE RELATIONSHIP WITH THE CHURCH IS
WORKING/ NOT WORKING, AND ANY OTHER THINGS YOU WOULD LIKE FOR US
TO KNOW ABOUT.

SUBMITTED BY COMMISSIONED PASTOR_____