

## ANNUAL REPORT TO PRESBYTERY BY MEMBER AT LARGE TEACHING ELDERS

The Constitution requires that Presbytery be responsible and accountable for the teaching elders who are its members. This form helps us fulfill our responsibility as it relates to member at large ministers and the ministries they serve.

Presbytery of Los Ranchos requires Boundaries Training certification every three years from all teaching elder members to promote safety for pastors and those they serve. The approved courses can be found at [Safegatherings.com](https://www.safegatherings.com). Please register as a New User to begin the training.

### **Date you completed PLR Boundaries Training**

**If your Boundaries Training Certification is current, would you like to serve as Pulpit Supply for one of our congregations?**

### **Your Name** *(Required)*

First

Last

### **Spouse's Name (if applicable)**

First

Last

**Address** *(Required)*

Street Address

Address Line 2

City

State / Province / Region

ZIP / Postal Code

Country

**Email** *(Required)*

**Daytime Phone** *(Required)*

**Please indicate if your phone number is** *(Required)*

- Home
- Mobile
- Office

List all full or part-time positions for which income was earned within the last twelve months. This includes secular, religious and self-employment. Give name of employing body. *(Required)*

## Membership Ministry Updates

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In what ways have you been active in the life and work of the Presbytery of Los Ranchos during the last year? *(Required)*

In what ways have you been involved with a local congregation during the last year? *(Required)*

Which congregation? *(Required)*

When have you administered the sacraments during the last year?  
*(Required)*

**In what religious, ecclesiastical, or ecumenical activities have you been engaged during the last year?** *(Required)*

**Please indicate how your present situation is not “intentional abandonment of the exercise of ministry”. [G-2.0502b]** *(Required)*

**Is there any other information you wish to share with the Committee on Ministry?** *(Required)*

**Would you like a phone call or visit from a COM member?** *(Required)*

- Yes
- No

**How can we pray for you?**

**Signature**



**Date**

mm/dd/yyyy

**Submit**