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| **District Superintendent Consultation Request – 2015 Church Conferences** |
| **Church Information** |
| **Name of Church** |       |
| **Name of Person Submitting Request** |       |
| **Title (e.g. pastor, SPRC Chair, Team Vital Chair )**  |       |
| **Leader’s Contact information** |
| **e-mail address** |       |
| **Daytime Phone Number**  | (     )     -      Ext.      |
| Team that is requesting meeting(Check only one) | P/SPRC  | [ ]  |
| Team Vital | [ ]  |
| Strategic Planning | [ ]  |
| Church Council  | [ ]  |
| Building Team  | [ ]  |
| Other Ministry Team: Please List       |
| **Opportunities, Issues, or Concerns** |
| What opportunities, issues, or concerns would you like to discuss with the District Superintendent?       |
| Please provide a brief description of the steps you have already taken to address the listed concerns and what has been the result.       |
| How long have you been working on the above concerns, or is this a new conversation?       |
| What do you hope will be accomplished in this time of consultation?       |
| **For Pastor/Staff Parish Relations Committee Requests Only** |
| Have you done an evaluation/performance review for your pastor? |  |
| Are the above concerns included in your Church Profile/Advisory Form?  |  |
| Have these concerns been discussed with the pastor?  |  |
| Do you feel these concerns can/will have appointment implications in the coming year |  |
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| *Please submit request by e-mail to your District Superintendent by September 15th.* *You will be contacted by the district office to set up a consultation date and time.* *Thank you for helping us serve you more effectively.*  |