

IN-CARE PROCESS AND REQUIREMENTS

Appendix I: Local Church's Annual Evaluation on *In-Care* Candidate (page 1 of 1)

Please type or print and return by March 15th to:

New Jersey Association, 195 Ridgewood Avenue, Glen Ridge, NJ 07028

Date:	
Your name:	
Phone:	
E-mail:	
Name of church:	
Address of church:	
Your title in church:	
In-Care Candidate:	

Your church has sponsored the person named above as a candidate for *In-care* status. Each year those *In-care* are evaluated as part of the process leading toward ordination. We ask your help in providing answers to the questions below. Please feel free to add any comments you think would be helpful to the Pre-Ordination Commission. Thank you for your time and support.

- 1) In what ways has the *In-Care* Candidate been an active participant in the church this past year?

- 2) Has the Candidate been consistent in worship attendance? If not, please explain:

- 3) In what ways is your church supportive of the Candidate in the pre-ordination process?