Metropolitan New York Synod Evangelical Lutheran Church in America

God's work. Our hands.

Report for Synodical Deacon

Last Name:		First N	First Name:		
Preferred address:					
Phone:					
E-mail:					
Spouse:					
Date of Setting Apart:					
Current stat	us: active	on-leave	retired		
Congregation:					
Do you wish to discuss the possibility of a change of call?					
No					
Yes Is your request urg		gent?	Yes	No	

1. In the past year, what were the most significant developments, events, or accomplishments in your life and ministry?

2. As you look forward to this year, what will be the special emphases of your ministry?

3.	As you engage in these emphases, what encouragement and support will you need?
4.	The continuing education in which I was involved this past year included:
5.	My most important continuing education learning of this past year was:
6.	Special concerns or issues I wish to share with the bishop and synod staff include:
	ou provide a written annual report to the congregation – please attach a copy for your synod file. en you have completed this form, save the pdf, and email it to annualreports@mnys.org.