

08/1/2013

**District Committee on Ordained Ministry
Action Report to the BOOM Registrar
North Alabama Conference**

District _____ Date _____

Candidate's Name _____ Date of birth _____

Candidate's e-mail address _____

Candidate's telephone numbers: mobile _____ home _____ office _____

The District Committee on Ordained Ministry took the following action(s) regarding the person listed above [check the appropriate action(s)]:

_____ Granted admission to the candidacy studies program according to ¶311.1b

_____ Withdrawn from the candidacy process

_____ **Granted certified candidacy status, ¶665.6 (3/4 majority vote by written ballot)

_____ **Granted transfer of candidacy from Other Annual Conference

_____ ** Denied transfer of candidacy from Other Annual Conference

_____ Recommended continuation as a certified candidate (¶312)

_____ *Recommended for licensing for pastoral ministry, to attend Licensing School, and upon completion, and when and if appointed to a local parish, award of the license as a local pastor – specify status below (¶315)

_____ *Recommended for continued eligibility for appointment as a local pastor (¶319)

_____ **Recommended discontinuance as a certified candidate (¶313) – give reason _____

_____ **Recommended **discontinuance** as a local pastor (¶320.1) – give reason _____

_____ **Recommended for **reinstatement** as a licensed local pastor (¶320.4)

_____ **Recommended for Provisional membership toward deacon's orders (¶324.10)

_____ **Denied for Provisional membership toward deacon's orders

_____ **Recommended for Provisional membership toward elder's orders (¶324.10)

_____ **Denied for Provisional membership toward elder's orders

_____ **Recommended for associate membership (¶322.1)

_____ **Denied for Associate membership

_____ **Recommended for readmission to conference relationship

_____ Readmission to Provisional membership (¶364)

_____ Readmission after honorable or administrative location (¶365)

_____ Readmission after exit of ministerial office (¶366)

****Give vote for actions above:** _____ for _____ against

Signature of dCOM chair or registrar

Signature of District Superintendent