

MINISTRY LICENSE RENEWAL FORM

THE LOCAL CONGREGATION: (Please mark, sign and date)

_____ The congregation affirms the renewal of _____'s
licensing for the coming year.

_____ The congregation does not affirm the renewal at this time.

Signature of the Board Chair

Date

Name of congregation

THE LICENSED MINISTER: (Please mark, sign and date)

_____ I continue to sense God's call to ministry and request the renewal of my ministerial
license.

_____ I wish to discontinue my ministerial license.

Signature of the Licensed Minister

Date

THANK YOU FOR YOUR ASSISTANCE! Please return this form to The Southern Ohio District, P O
Box 785, Greenville, OH 45331. Attention Ministry Commission by **December 15, 2016.**