



**LOCAL BOARD OF ADMINISTRATION  
INITIAL RECOMMENDATION AND CERTIFICATION OF MINISTERIAL STUDENT**

<b>Student Information</b>	
Name	
Home Address	
Phone Number	
Email Address	
Gender	
Marital Status	Spouse's Name
<b>Church Information</b>	
Church Name	
Lead Pastor Name	

What level of recognition are you recommending candidate for?

- Ministerial Student (Ordination Track)
- Special Worker (Commissioned Track)

Is there evidence of a clear, consistent walk with Christ?

- Mature Christian
- Growing Christian
- New Christian

Remarks:

Does the candidate testify to a definite, heart-felt call to full-time Christian ministry?

Does the LBA recognize areas of giftedness that would support this call? Please specify:

Has the candidate proven faithful to the local church? (i.e. time, talents, tithing)

Does the candidate possess a teachable spirit?

Is the candidate willing to abide by the Leadership Covenant Commitments found in the Wesleyan Discipline, Guides and Helps to Holy Living [formerly Covenant Membership]?

### **LBA Certification of Ministerial Student**

This certifies that \_\_\_\_\_ [Student's Name] is a member in good standing of \_\_\_\_\_ [Church Name] and is hereby recommended by the Local Board of Administration to the Western New York District of the Wesleyan Church as having the graces, gifts, usefulness and other qualifications necessary for district authorization as a Ministerial Student.

By order and in behalf of the Local Board of Administration of

\_\_\_\_\_ [Church Name]

\_\_\_\_\_  
Pastor

\_\_\_\_\_  
LBA Vice Chair

\_\_\_\_\_  
LBA Secretary

\_\_\_\_\_  
Date

Submit this form by email, fax or mail:

office@wnydistrict.com

Fax 716-648-4053

Western New York District, The Wesleyan Church, 4660 Pinecrest Terrace, Eden, NY 14057