

Ministry Description

Title & Name of individual: _____

Contact Information

Mailing Address: _____

Preferred Phone: _____

Preferred Email: _____

Congregation _____

(Congregation Name & City/ST)

Purpose of ministry: _____

Responsible to: _____

Ministry description: _____

Desired results: _____

Time commitment (amount of time, length of service): _____

Skills, talents, gifts, qualifications: _____

Training opportunities: _____

Compensation, if any: _____

Date: _____

Note: Use this form to tailor the ministry description to the needs and expectations of your church.