



Certified Lay Ministry Candidate Charge Conference Approval

(To be submitted with the Reports of the Local Church Annual Charge Conference)

Date of Charge Conference: _____

Location of Charge Conference: _____

CLM Candidate's Name	Home Church Name
Home Address	Church Address
City/State/Zip	City/State/Zip
Home Phone/Cell	Church Phone
CLM Modules Completed	
	District

Request of Certified Lay Ministry Candidate

I hereby request the recommendation of my Charge Conference for participation in the Certified Lay Minister Program.

Signed (CLM Candidate) _____ Date: _____

Recommendation of the Pastor of _____ UMC

I recommend concurrence with this request:

Signed (Pastor): _____ Date: _____

**** Submit with Church Charge Conference Reports and forward to the office of the Conference Director of Lay Servant Ministries.**
