**THE 2021 ANNUAL PROFESSIONAL REGISTRY**

**AMERICAN BAPTIST CHURCHES OF MICHIGAN**

**COMMISSION ON ORDINATION AND STANDING**

www.abc-mi.org

Dear Professional Church Leaders:

As Baptists, we believe the local fellowship of believers should nurture, call out, affirm, support (financially and spiritually), validate, pray for, and finally, lay hands on a candidate for the Christian ministry in the solemn act of ordination. While this "called out one" serves as a minister of that local congregation, he/she is accountable for performance of ministry to that ordaining body.

However, once a minister of the Gospel leaves the membership of the ordaining church and seeks a place in the wider fellowship of American Baptist Churches USA (or its affiliated missions or agencies), that minister is accountable to the Region for continuing validation of his/her "standing" with the wider fellowship. Thus, “standing" or "recognition" of an ABC-MI Professional Church Leader (ordained, commissioned, or lay), is granted each year by the ABC-MI Commission on Ordination and Standing. A Professional Registry is then compiled to reflect a current listing of persons within ABC-MI who have professional standing and/or recognition.

If you wish to be listed in the 2021 Annual Professional Registry, please complete the appropriate sections of the attached (also on our website) questionnaire and return it to the Region Office no later than **January 31, 2021.**

PLEASE NOTE: *If you completed the form last year*, and your name is listed in last year’s Registry and your status or information *has not changed*, you need only complete the contact information at the top of the first page and check the “no change” box*. If you did not return the questionnaire last year*, your name will not be in last year’s Registry. Therefore, you must complete and *return the entire form*.

**Any professional church leader** (ordained or non-ordained) is welcome and encouraged to fill out the questionnaire, provided you meet the following qualifications:

* Hold membership in an American Baptist Church affiliated with the American Baptist Churches of Michigan,
* Serve in a professional capacity in an American Baptist church or ministry-related setting at least 20 hours per week,
* Receive some monetary compensation for your service.

Exception to the ABC-MI church membership rule applies to retired clergy only.

Exceptions to the 20 hour/compensation rule are: licensed candidates, seminary students, retired clergy, and those currently waiting for placement. However, persons in these categories must complete and *return the entire form*.

**BENEFITS OF LISTING YOUR NAME IN THE ANNUAL REGISTRY**

* **ENABLING** those listed to have access to Region and Denominational grants and scholarships.
* **RECEIVING** updated information, notifications, and invitations to events helpful to Professional Church Leaders.
* **ASSISTING** the Region and Denomination to maintain an accurate, current list of Professional Church Leaders in Michigan.
* **RECOGNIZING AND AFFIRMING** that you are a vital part of the ministerial leadership of our Region and Denomination.

If you have any questions when filling out this form please contact Rev. James Leonard, Chair of the Commission on Ordination and Standing at [[jmleonardfamily@msn.com](mailto:jmleonardfamily@msn.com)](mailto:pastor@firstbaptistgb.org).

**PLEASE RETURN COMPLETED FORM BY JANUARY 31, 2021**

email to [office@abc-mi.org](mailto:office@abc-mi.org) |fax to 517.332.3186 |mail to ABC-MI at 4578 S. Hagadorn Rd. East Lansing, MI 48823

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**2021 ANNUAL PROFESSIONAL REGISTRY QUESTIONNAIRE**

American Baptist Churches of Michigan

**Commission on Ordination and Standing**

|  |  |  |
| --- | --- | --- |
| **Date:** | **Title:** | |
| **Name:** | | |
| **Mailing Address: City: State: Zip:** | | |
| **Phone:** | |  |
| **Email:** | |  |

**I am listed in last year’s registry and there is NO CHANGE**

If you were **not** **listed** in last year’s registry or there are **changes** you wish to report, please complete the following sections:

**CURRENT MINISTRY**

|  |
| --- |
| What is your position or title? |
| Where does your ministry take place? |
| If your ministry takes place outside of an ABC-related church, institution or organization, please list it here: |
| In what church do you hold membership? |
| Do you work 20 or more hours per week in your current professional ministry? |
| Do you receive monetary compensation for this work? |
| Is your current ministry your primary vocation? |
| If not, please list your primary vocation: |

**PLEASE SELECT THE CATEGORIES THAT APPLY.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Full-Time Active Clergy |  | Ordained Clergy |  | Certified Lay Professional |
|  | Bi-Vocational Clergy |  | Licensed Clergy |  | Non-Ordained Professional Church Leader |
|  | Retired Clergy |  | Seminarian |  | Other: |

See other side

**CURRENT STATUS**

**AMERICAN BAPTIST RECOGNITION**

Do you have current ABC recognition of ordination? Yes No

ABC Region in which ordination was recognized: Date of recognition(mo/day/year): \_\_\_\_\_\_

If you are an institutional or military chaplain or pastoral counselor, are you endorsed by the ABC,USA Committee on Chaplains & Pastoral Counselors? Yes No Date of endorsement(mo/day/year):

**NON-ABC RECOGNITION**

Do you have current ordination / recognition / standing in a non-ABC denomination or church? Yes No

If so, please list the denomination or church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date** (mo/day/year) ­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_and place ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_in which ordination / recognition / standing was granted.

**­­­­­­­­EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| From what college or university did you graduate? | | | |
|  | Degree: | | Graduation Year: |
| Are you a seminary graduate? Yes No | |  | |
|  | Name & Location of Seminary: | | |
|  | Degree: | | Graduation Year: |
| Were you granted equivalency to educational requirements for ordination by an American Baptist Church or Region?  Yes No | | | |
|  | If so, please list name of church or region: | | |
| Are you a Certified Lay-Professional? Yes No | | | |
|  | If so, please list the church or Region which granted lay professional status: | | |
|  | Date of certification: (mo/day/year) | | |

**­­­­­­PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Gender:  Female ­ Male | |
| Date of Birth: |  |
| Ethnicity (Check as many as apply): | American Native  Asian Pacific  African American  Euro-American |
|  | Haitian  Hispanic  Multi-Racial  Other |

**QUESTIONS/COMMENTS:**

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