



FORMATION FOR MINISTRY

PASTOR'S EVALUATION OF CANDIDATE FOR COMMISSIONING AND CERTIFICATION

Candidate's Name: _____

Area of Ministry: _____

Parish: _____ City: _____

I **Recommend** **Do Not Recommend** this candidate for commissioning.

With reference to the candidate in question, please check those words or phrases which seem appropriate.

Assumption of Responsibility

Strives to be continually open to God's will and His Spirit

Freely chooses and assumes responsibility for his/her choices

Actively seeks responsibility

Generally cooperative

Sometimes reluctant

Actively resists responsibility

Comments: _____

(over)

Performance of Duties

- Understands the church as a community of faith
- Shows leadership in guiding others to live as responsible members of a community of faith
- Uses opportunities which arise to foster group cohesiveness
- Can usually be depended upon
- Generally unreliable

Comments: _____

Responsible to Supervisory Guidance

- Able to receive criticism and give feedback
- Manifests skills and/or specific training in specialized ministry
- Has completed the thirty hours of supervised ministry
- Passive
- Moderately resistant
- Highly defensive

Comments: _____

Participation in the Life of the Parish or other Institution

- _____ Listens effectively, showing empathy, compassion and warmth
- _____ Copes well with feelings in self and others
- _____ Able to give a Catholic interpretation to the experience of life
- _____ Has demonstrated a mature commitment to Jesus Christ and His Church, particularly to the local church, the Diocese of Ogdensburg.
- _____ Reflects through his/her behavior a personal relationship with the Lord and an ever growing life of prayer
- _____ Understands and accepts the reality that he/she is not an isolated individual but part of a community of persons who share together, plan together, pray together and are deeply concerned about one another.
- _____ Thoroughly involved
- _____ Adequately involved
- _____ Participates minimally

Comments: _____

Additional comments sponsor or supervisor would like to include:

(over)

As sponsor/supervisor of: _____
(Name of Candidate)

Please Check:

_____ I recommend

_____ I do not recommend

that he/she be commissioned and certified as a lay minister in the Diocese of Ogdensburg

(Sponsor's Signature)

(Supervisor's Signature)

(Date)

(Date)

General comments of candidate in regard to Sponsor's or Supervisor's evaluation:

(Candidate's Signature)

(Date)