

**Delaware District Committee On Ministry  
Yearly Interview Of:**

Candidate's Name: \_\_\_\_\_

Ministry Track:   \_\_\_ Licensed Local   \_\_\_ Deacon   \_\_\_ Elder   \_\_\_ CLM

Status:   \_\_\_ Inquiring   or   \_\_\_ Certified

Name of Church or Charge: \_\_\_\_\_

Mentor's Name: \_\_\_\_\_

Date of Interview: \_\_\_\_\_