

**Focal Ministry: Review Form**

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| **Name of Focal Minister** |  | | |
| **Name of Oversight Minister** |  | | |
| **Parish** |  | | |
| **Mission Area** |  | | |
| **Date of Authorisation** |  | | |
| **Date of Review** |  | | |
| **Type of Review (please circle)** | Probationary | Annual | Three Yearly |

| **What has gone well?** | **What might need some prayerful reconsideration?** |
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| **Items from Ministry Agreement** |  |
| **Working relationships** |  |
| **Core qualities of a Focal Minister** |  |
| **Learning and Equipping** |  |
| **Any further comments** | |

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| **Is your DBS up to date?** | Yes / No |
| **Is your safeguarding training up to date? If no, what needs renewing?** *(this needs renewing every three years)* | Yes / No |
| **Note of any changes to Ministry Agreement** |  |
| **Actions following review** |  |

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| **How confident do you feel about your ministry?**  **(please circle your answer)** | **1** | **2** | **3** | | **4** | | **5** | | | **6** | **7** |
| **Not confident** | |  | |  | |  | | | **Very confident** | |
| **Comments:** | | | | | | | | | | | |
| **How well equipped do you feel to carry out your ministry?**  **(please circle your answer)** | **1** | **2** | **3** | | **4** | | **5** | | | **6** | **7** |
| **Not resourced** | | |  | |  | |  | **Very well resourced** | | |
| **Comments:** | | | | | | | | | | | |

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| **Signed (Focal Minister)** |  | **Date** |  |
| **Signed (Oversight Minister)** |  | **Date** |  |