

**Focal Ministry: Review Form**

|  |  |
| --- | --- |
| **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?** |
| --- | --- |
| **Items from Ministry Agreement** |  |
| **Working relationships** |  |
| **Core qualities of a Focal Minister** |  |
| **Learning and Equipping** |  |
| **Any further comments** |

|  |  |
| --- | --- |
| **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** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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:** |

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