**S17 District Chair’s References in relation to Initial Stationing Appointments for Presbyters**

Please submit the completed form with the initial stationing profile to: [stationingadministration@methodistchurch.org.uk](mailto:stationingadministration@methodistchurch.org.uk)

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| **INFORMATION** |
| Name and Number of Circuit |
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| Name of Superintendent |
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| Is this in relation to a probationer’s appointment? |
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| Is this in relation to an appointment for a Minister of another Church or Conference? |
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| Name of the nominated Minister in Oversight. |
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| In which circuit are they currently stationed? |
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| Name of the nominated Supervisor   * *Please note that the Supervisor needs to be consistent through the two years of probation and therefore it is not appropriate to appoint a supervisor if they will be in stationing or on sabbatical during this time.* * *The Supervisor must not be the same person as the Minister in Oversight.* * *If the Minister in Oversight is an immediate predecessor in any of the churches in the appointment, or if this is a two minister circuit, the Supervisor must be in a different circuit to the probationer.* |
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| In which circuit are they currently stationed or living? |
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| **REFERENCE FOR MINISTER IN OVERSIGHT** |
| Name of nominated Minister in Oversight |
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| How long has the Chair known this minister? |
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| Who has the Chair consulted in writing this reference?  *If the Chair has known the Minister for less than two years, please consult the minister’s previous Chair.* |
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| Is this minister likely to be in stationing or on sabbatical during the first two years of the appointment? Please give details. |
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| If yes – who will cover this role in their absence? |
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| Reference: Please describe the skills, experience and personal qualities that make this person suitable to be the Minister in Oversight.  *If the appointment is for a Minister of another Church or Conference, please indicate that the nominated Minister in Oversight is alert to the challenges a MOCC may face and will be familiar with the contents of the MOCC induction handbook* |
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| **REFERENCE FOR SUPERVISOR** |
| Name of nominated Supervisor |
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| How long has the Chair known this supervisor? |
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| Who has the Chair consulted in writing this reference?  *If the Chair has known the supervisor for less than 2 years, please consult the person’s previous Chair.* |
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| Is the nominated supervisor likely to be consistently available through the first two years of the appointment? |
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| On what date did they become authorised to supervise? |
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| Are they currently undertaking Supervision training? If so, when are they due to complete the training?  *Please give a reference for an alternative supervisor (by creating a new copy of this table below) in case the first nominee is unable to complete the training. Please ensure that both are named on the profile.* |
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| Are they due to be reaccredited as a supervisor during the next three years? If so when? |
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| Reference : Please describe the skills, experience and personal qualities that make this person suitable to be the Supervisor  *If the appointment is for a Minister of another Church or Conference, please indicate that the nominated Supervisor is alert to the challenges a MOCC may face and will be familiar with the contents of the MOCC induction handbook* |
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| **SIGNATURE** | |
| Signature of District Chair |  |
| Date |  |