

**International Fellowship of Bible Churches
Chaplain Initiatives
CHAPLAIN ACTIVITY REPORT**

Full Name:

Title/Rank:

Year:

Period:

to

Church where membership resides:

Address:

City:

State

ZIP

Phone Number:

Pastor's Name:

Pastor's Phone:

Pastor's Email:

Fill out the form below and mail by January 31 to: IFBC Chaplain Initiatives
P.O. Box 5555
Ft. Oglethorpe, GA 30742
or see options at end of report

Please select your current status:

Full-time

Part-time

Volunteer

Layperson

Retired, inactive as a chaplain (complete information preceding the mailing address above and "Professional" 1-2, 4-6, 9-10)

Retired, but active as a chaplain (also select one of the first four)

Inactive as a chaplain, not retired (complete information preceding the mailing address above and "Professional" 1-2, 4-6, 9-10)

Do Not Use Statistics That Are For Your Ministry as Pastor of a Local Church

Professions of Faith/Rededications:

Number of contacts made through:

Campus

Civil Air Patrol (CAP)

Correctional Institution

Fire Department

Hospice

Hospital

Other Health Care

Homebound Visits

Law Enforcement

Other EMS

3. Outline involvement in your local church.

4. In what areas are you growing professionally and educationally? How?

5. Have you been faithful to the PLAN FOR SPIRITUAL DEVELOPMENT AND INTEGRITY you identified in last year's report? If deficient, in what way did you have difficulty?

6. Have you been completely open and honest in your response to #4 above? Yes No

7. What is your PLAN FOR SPIRITUAL DEVELOPMENT AND INTEGRITY (how are you going to foster and guard your own spirituality) for this coming year?

8. Detailed description of your ministry during the past twelve months.

9. Describe several situations associated with your ministry this year that have demonstrated the power of God (attach additional sheets as necessary, but do not duplicate examples sent in since last year's report).

10. Describe any situation which you want shared with others for their support in prayer.

11. How can the Director or the Chaplain Service Council (CIC) be of assistance to you?

12. If this form does not completely fit the chaplaincy ministry you provide, please give additions to your story on a separate sheet of paper.

13. Please attach or send any additional information, including pictures that might be of interest (by sending the pictures, either paper or, preferably digital, you are giving Chaplain Initiatives and IFBC permission to use them for promotional and/or informational purposes).

14. I have submitted a report within the last 12 months to my local church leadership. Yes No
If "no", please explain:

15. I have attached a copy of that report. Yes No If "no", please explain:

16. I have requested my pastor to send an updated letter of recommendation to the address below. Yes No
If "no", please explain:

17. It is permissible for the DCI or their representative to contact my pastor. Yes No
 If “no”, please explain:
18. If employed as a chaplain, I have attached a copy of my most recent employee evaluation. Yes No
 If “no”, please explain:
19. It is permissible for the IFBC DCI or their representative to contact my employer to discuss any issues of concern and I release my employer to discuss such matters. Yes No
 If “no”, please explain:

Signature

Date

Please Complete, Sign and Return by:

Please include any unsubmitted copies of any reports you generated related to your work and any job and/or performance reviews received from any source, including your most recent annual report to your local church. Also, please have the pastor where your membership resides send an updated Letter of Recommendation to the address below. Your report will not be considered complete until that Letter is received.

E-mail to: gary@bridgedocuments.com

or

Fax – 706-861-7777

or

Mail – IFBC Chaplain Initiatives

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Ft. Oglethorpe, GA 30742