

Reference Names

(For Ordination: Deacon or Elder)

One of the Following:

If serving on a church staff: Senior Pastor. If serving as Pastor: SPRC Chairperson. If serving in Special Appointment: Person who oversees your work

Name _____

Address _____

_____ Email: _____

2. Reference of your choice.

Name _____

Address _____

_____ Email: _____

3. Reference of your choice.

Name _____

Address _____

_____ Email: _____

4. District Superintendent.

Name _____

Address _____

_____ Email: _____

These names must be submitted to the File Administrator by **November 1**. The Administrator will send recommendation forms to your references.

Mail to: Rev. Duane VanGiesen

File Administrator, BOM

North Texas Conference Ministry Center

PO Box 866128 Plano, Texas

75086-6128

vangiesen@ntcumc.org

Phone: 972-526-5046 FAX: 972-526-5047

Name of Candidate: _____

- _____ I *waive* the right to read my letters of reference.
- _____ I *do not waive* the right to read my letters of reference.

Signed: _____ Date: _____