|  |  |  |
| --- | --- | --- |
|  | Education for Ministry EM3 **Report** |  |

|  |
| --- |
| Title: Name: |
| Address: |
|  |
| Email: |
| Tel. No.: |
| Synod: |
| PASTORATE (or other appointment) |

**DETAILS OF COURSE ATTENDED**

I attended (course) On (dates):

From this course I learned:

I recommend / do not recommend this for other ministers because:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I received a grant of £ …….…………... From: (source of funding) ………………….

Signed:

Date:

***Please return to your Synod Training and Development Officer***