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|   | 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***