

**Mid-Atlantic District Church of the Nazarene  
Approval Form for Assistants and Associates in the  
Local Church by the District Superintendent**

160.1. All local paid or unpaid associates who provide specialized ministry within the context of the local church and enter into a relationship of vocational ministry within the church, including directors of childcare/schools (birth through secondary), shall be elected by the church board, having been nominated by the pastor. All nominations must have prior approval in writing by the district superintendent, who shall respond within 15 days after receipt of the request.

160.2. The employment of such associates shall be for no more than one year and may be renewed upon recommendation of the pastor with the prior written approval of the district superintendent and the favorable vote of the church board. The pastor shall be responsible to conduct an annual review of each staff member. The pastor, in consultation with the church board, may make recommendations for staff development or modifications in job description as indicated by the review. The dismissal of all local associates prior to the end of the employment term (end of fiscal church year) must be by recommendation of the pastor, approval of the district superintendent, and the majority vote of the church board. Notification of dismissal or nonrenewal must be given in writing not less than 30 days prior to the termination of employment. —MANUAL, 2013- 2017 [Italics added]

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**ANNUAL REQUEST FOR APPROVAL**

THIS IS TO REQUEST THE APPROVAL FOR OR RENEWAL OF APPROVAL FOR:

\_\_\_\_\_  
(Name)

TO SERVE AS \_\_\_\_\_

FOR THE \_\_\_\_\_ CHURCH OF THE NAZARENE

FOR THE 2016 ASSEMBLY YEAR

CHURCH'S ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Approved by the Church Board, (date) \_\_\_\_\_

Signed by Pastor: \_\_\_\_\_

Signed by Church Board Secretary: \_\_\_\_\_

Please send this request to  
Mid-Atlantic District Church of the Nazarene  
108 Central Avenue, Glen Burnie, MD 21061  
manazoffice@gmail.com

When approved a copy will be returned to you

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I HEREBY APPROVE THE ABOVE NAME PERSON TO SERVE IN THE STATED POSITION

Signed \_\_\_\_\_  
Kenneth L. Mills, District Superintendent