

# Pastoral Call Form

## Presbytery of Missouri River Valley, Presbyterian Church (USA)

The \_\_\_\_\_ Presbyterian Church of \_\_\_\_\_  
(Church PIN \_\_\_\_\_), being well satisfied with your qualifications for ministry and confident that we have been led to you by the Holy Spirit as one whose service will be profitable to the spiritual interests of our church and fruitful for the Kingdom of our Lord, earnestly and solemnly calls you, \_\_\_\_\_, of or under the care of \_\_\_\_\_ Presbytery, to undertake the ministry of \_\_\_\_\_ (Pastor, Co-Pastor, Associate Pastor) of this congregation, beginning \_\_\_\_\_, promising you in the discharge of your duty all proper support, encouragement and allegiance in the Lord. That you may be free to devote full time (part-time) to the ministry of the Word and Sacrament among us, we promise and obligate ourselves to provide you the following annually:

<b>Cash Salary</b>	\$
<b>Housing:</b>	
<b>Manse Value (if provided), and/or</b>	\$
<b>Housing and/or utility allowance</b>	\$
<i>Deferred Compensation (e.g., 403b, section 125 plan, etc.)</i>	\$
<i>Social Security Offset</i>	\$
<b>EFFECTIVE SALARY (total of above)</b>	\$

### Board of Pensions:

#### Full family medical, pension, disability, and death benefit coverage

<i>Additional benefits:</i> _____	\$
<i>Other benefits:</i>	
<i>Other:</i> _____	\$

### Professional reimbursable expenses:

<b>Travel expense at \$_____ per mile (IRS rate recommended)</b>	\$
<b>Continuing Education reimbursement</b>	\$
<i>Other:</i> _____	\$

*Minimum Terms of Call | Family Medical Leave (called/installed ministers) - 12 week paid Family Medical Leave (G-2.0804) shall be accessed for the following reasons: health of the pastor; parental leave following birth, adoption, or foster care; health issues of the pastor's immediate family (partner/spouse, child/foster child, parent); and for bereavement of the pastor's immediate family. This leave is available each calendar year and the time shall be recorded in the Session minutes.*

### Paid vacation leave of four weeks annually, which includes four Sundays

### Paid continuing education leave of two weeks annually, which includes two Sundays (cumulative up to six weeks)

### Moving expenses

(Note: Items above that are in bold typeface are required. Others are optional.)

This call was issued at a duly called and constituted meeting of the congregation on \_\_\_\_\_.

The Session commits itself to reviewing the adequacy of these terms of call annually.

(Signed) \_\_\_\_\_, Clerk of Session

Print Name \_\_\_\_\_

**Having moderated the congregational meeting which extended this call for ministerial services, I do certify that the call has been made in all respect according to the rules laid down in the Form of Government.**

**(Signed) \_\_\_\_\_, Moderator of the Congregational Meeting**

***CERTIFICATION OF CALL***

**By the Presbytery of Missouri River Valley**

This call was approved by the **Presbytery of Missouri River Valley**, through action taken by its Commission on Ministry.

Date of Action \_\_\_\_\_ (Signed) \_\_\_\_\_, COM Moderator

Date of Action \_\_\_\_\_ (Signed) \_\_\_\_\_, Stated Clerk

**- OR -**

This call has been reviewed by the Commission on Ministry. The Commission recommends that the presbytery approve this call.

Date of Action \_\_\_\_\_ (Signed) \_\_\_\_\_, COM Moderator

This call was approved by the **Presbytery of Missouri River Valley**.

Date of Action \_\_\_\_\_ (Signed) \_\_\_\_\_, Stated Clerk

**By Candidate**

This is to certify that I have received and accepted this call.

Date of Acceptance \_\_\_\_\_ (Signed) \_\_\_\_\_