

COMMISSIONED LAY ECCLESIAL MINISTRY PROGRAM
PASTOR/PARISH MENTOR EVALUATION OF STUDENT

Student _____ Main Ministry _____

Pastor / Mentor (Print Name) _____

Parish (Print Name) _____

In what ministries is this person involved?

Describe the role (s) this person exercises

1. I have known this person for _____ years.
2. He/she is known to the parish community and respected by it? _____
3. He/she has requested time for guidance regarding ministry? ____yes ____no
4. I have established a time for monthly dialogue with this person in order to be updated on is/her ministry and offer guidance? ____yes ____no
5. He/she carries through on assigned projects ____yes ____no
6. I experience his/her ability to lead others ____yes ____no
7. He/she reflects the theology of Vatican II when dealing with others? ____yes ____no
8. He/she works well with people and demonstrates the desire and ability to be of service? ____yes ____no
9. This person has demonstrated competence & dependability in carrying out ministry responsibilities. ____yes ____no
List two examples:

10. The three most effective strengths this person demonstrates in ministry are:
A.
B.
C.
11. Three areas I believe this person could grow in for more effective service are:
A.
B.
C.
12. Describe how this person relates to you in your role as Pastor and/or with other clergy in their role as priest:

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PASTOR EVALUATION OF STUDENT

13. Describe any inappropriate attitudes or behaviors you would recommend improvement on.

14. Note any positive development you have observed in this person since their enrollment in CLEM:

15. I have observed in this person (choose one): outstanding ____; good ____; average ____; fair ____ ministerial competence and dependability during the past year.
Comment:

16. This person empowers others to serve and lead and does not demonstrate fear of collaboration or undue control of leadership role. (Choose one): outstanding ____; good ____; average ____; fair ____
Comment:

17. I have observed in this person (choose one): outstanding ____; good ____; average ____; fair ____ spiritual practice and faith integration during the past year.
Comment:

18. I have observed in this person an (choose one): outstanding ____; good ____; average ____; fair ____ spirit of service and involvement during the past year.
Comment:

19. I wish to sponsor ____ (or) I do not wish to sponsor ____ this person for another year because

20. I have discussed this evaluation with the student? ____yes ____no
If so, when? _____ and what was the outcome

21. I'd like to discuss my concerns with the Director of the program. ____yes ____no, and I am available on (date) _____ for a phone conversation or visit on (date)_____ .

Pastor: _____ **Date :** _____

Mentor: _____ **Date** _____

*In the spirit of good coaching and guidance, we encourage discussion of this evaluation with the student. Thank you for your cooperation and support. **Please return this evaluation to the attention of Gloria Pagan, COMMISSIONED LAY ECCLESIAL MINISTRY PROGRAM, San Pedro Center- 2400 Dike Rd. Orlando, FL 32792. First & Second Year students form due by April CLEM Weekend.***