

CFCN

BOARD REPORT

Name: _____

Position/Ministry Area: _____

Date of Report (MM/DD/YY): _____

1. **ACTIVITIES AND/OR ACCOMPLISHMENTS:**

2. **GOALS FOR NEXT MONTH:**

3. **PRACTICING PRESENCE** (how have you been practicing presence this last month?):

of conversations: _____

4. **CONNECTING** (how are you connecting with the people on your prayer/connection list?):

5. **MISSION OF THE CHURCH** (How is your area of responsibility contributing to the mission of the church?)

6. **PARTNERSHIP** (how can the church board and/or pastoral/office staff help you to accomplish your goals?):