Southeastern Minnesota Synod, ELCA

**Interim Pastor’s Exit Report**

*Please return to: Cheryse Brenno*

*Southeastern Minnesota Synod, 418 Sumner Street E, Suite 300,*

*Northfield, MN 55057; or email to brenno@semnsynod.org*



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| --- | --- |
| **Name of Interim Pastor:** |  |
| **Congregation Name and City:** |  |
| **Dates of Service:** |  | **Today’s Date:** |  |

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| 1. Summary of situation when you arrived:
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| 1. Summary of present status of congregation:
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| 1. Summary of interim experience:
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| 1. What difficulties were dealt with during the transition period?
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| 1. How might synod staff have provided additional support during the transition period?
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| **Please use the back of this form for any additional comments you would like to share.** |
| Signed:  |  | Date available for next interim: |  |