

CHARGE CONFERENCE FORM #4: Annual Report on Church Staffing

WORKSHEET FOR PREPARATION – COMPLETE FORM ONLINE at http://www.calpacumc.org/ccf4_staffing

WHY THE STAFFING REPORT IS REQUIRED

The Conference Treasurer's Office (Benefits Office) needs this information on a regular basis to (1) assess and negotiate for benefits on behalf of churches and church employees, (2) verify eligibility for benefits.

WHO COMPLETES THIS REPORT

This report is to be completed by the SPRC Chair and/or Benefits Administrator, who may call on other church leadership as needed to complete the form.

WHEN THIS REPORT SHOULD BE COMPLETED

Complete and sign at least one week before charge conference.

RESOURCES YOU MAY NEED

The following documents may be needed to complete the work in this report.

- Many questions from previous years are repeated here, so a previous report will be useful for completing this one. However, this report has changed from previous years to address the current needs of the Benefits Office.
- Worksheet to prepare to complete this form
- If you have had staffing changes or qualifying life events in the lives of your employees since last year, which have changed who are eligible for benefits at your church within the last 30 days, and you have not reported them, you should complete CCF#27 Insurance Benefits Eligibility.

DISTRIBUTION OF REPORTS: The following individuals receive a copy of the report with the included information. You do not need to email your form separately to any of the individuals named below.

- **SPRC Chair** or equivalent
- **Benefits Administrator** or equivalent
- **Pastor-in-Charge**, Lead Pastor, or equivalent
- **Church Office** email, if provided
- **District Office** for District Superintendent
- **Conference Treasurer's Office Benefits Manager**
- **Conference Data Services** for archiving and record updates

REPORT YEAR					
ABOUT THE LOCAL CHURCH					
A. DISTRICT		Choose EAST, HAWAII, NORTH, SOUTH, or WEST			
B. LOCAL CHURCH					
C. SPRC CHAIR					
D. SPRC CHAIR EMAIL					
E. CHURCH BENEFITS ADMINISTRATOR					
F. CHURCH BENEFITS ADMINISTRATOR EMAIL					
G. PASTOR-IN-CHARGE					
H. PASTOR-IN-CHARGE EMAIL					
I. CHURCH OFFICE EMAIL					
In the context of your local ministry setting, please answer the following questions.					
• Preschool employees should be included in your reporting if the preschool is incorporated with the church. If the preschool is a separate entity, do not include this staff in your report. • For Type: ○ Clergy = appointed by the bishop ○ Lay = assigned by the bishop as a Lay Person Assigned or otherwise hired by the local church • If your charge has more than 45 employees, please contact Data Services at dataservices@calpacumc.org before completing the form.					
i. EMPLOYMENT CLASSIFICATIONS					
1. HOW MANY HOURS PER WEEK CONSTITUTES FULL-TIME EMPLOYMENT FOR LAY STAFF? Individuals working this many hours per week or more are full-time. Individuals working less than this many hours per week are considered part-time.					
2. HOW MANY HOURS PER WEEK CONSTITUTES PART-TIME EMPLOYMENT FOR LAY STAFF?		Choose all that apply: 1-9 HOURS, 10-19 HOURS, 20-29 HOURS, 30-34 HOURS, 35-39 HOURS.			
3. DOES YOUR CHURCH HAVE ADDITIONAL CLASSIFICATIONS FOR LAY STAFF, OTHER THAN FULL-TIME OR PART-TIME? IF SO, PLEASE LIST HERE. If no other classifications, enter None. Examples may include temporary, seasonal, etc.					
ii. CURRENT EMPLOYEES					
4. HOW MANY UNIQUE EMPLOYEES DO YOU HAVE? Include appointed clergy.					
5. In the question below, list each employee position by name, title, benefits eligibility, type, and classification. If you are listing more than 45 employees, contact Data Services at dataservices@calpacumc.org before starting the online form.					
	EMPLOYEE NAME (Last, First)	POSITION TITLE	ELIGIBLE FOR BENEFITS?	POSITION TYPE	POSITION CLASSIFICATION
5.01.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.02.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.

[illegible]

	EMPLOYEE NAME (Last, First)	POSITION TITLE	ELIGIBLE FOR BENEFITS?	POSITION TYPE	POSITION CLASSIFICATION
5.39.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.40.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.41.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.42.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.43.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.44.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.
5.45.			YES or NO.	Choose CLERGY or LAY.	Choose FULL-TIME, PART-TIME, OTHER.