Northwest Washington Synod
Evangelical Lutheran Church in America
God's work. Our hands.

SALM'S REPORT – 2026

Reporting for 2025

Please download and save file to your computer before filling out this form.
Email to office@lutheransnw.org when finished!

Date of Ordination: _____ (MM/DD/YYYY) Birthdate: _____ (MM/DD/YYYY) ◯ Pastor ◯ Deacon ◯ SALM

_____ (LAST NAME) _____ (FIRST NAME) _____ (PREFERRED NAME)

Pronouns: _____

This is how you would like the Bishop's Office to contact you:

Preferred Email:_____

Alternate Email:_____

Preferred Phone: _____

Mailing Address: _____

City:_____ State: _____ Zip Code: _____

☐ Mailing Address same as Physical Address

Physical Address: _____

City:_____ State: _____ Zip Code: _____

Would you like to be on Pulpit Supply? ☐ YES ☐ NO

What geographic areas? _____

Name and location of congregation of which you are a member:

_____ (Church Name) _____ (Church Location)

If applicable, how would you like to receive your Anniversary Certificate?

Synod Office ☐ Synod Hosted Event (i.e. Synod Assembly) ☐ Mailing ☐

Your Family

If married:
Preferred Name of Spouse: _____ Date of Marriage:_____ (MM/DD/YYYY)

Did you have a change of marital status last year? ☐ YES ☐ NO

Did you add any dependents in the last year? _____
Name, Relation, Date of Birth

Information on this form may be shared with other synod staff persons at the bishop's discretion.

Health & Wellness

1 is low and 5 is high

I consider myself physically, emotionally and spiritually healthy.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I have one or more of the following: spiritual director, coach, therapist, or mentor.
On the scale, rank the support you garner from them.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

I have a network of support I lean into regularly. (colleagues, friends, family)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What have been your personal joys and challenges?

What encouragement and support do you need from Bishop or synod staff?

How is your relationship to God?

Continuing Education

Question boxes hold up to 300 characters

What continuing education did you participate in 2025?
What was helpful in these events?

Have you participated in any of the Synod's LiVE events? If yes, please name which ones you have attended.

What would you be interested in learning that would encourage/support you in your ministry?

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Questions about your Call

Where are you called: _____

What is your job title: _____

Do you have a sabbatical policy? ☐ YES ☐ NO

Did you have a sabbatical in 2025? ☐ YES ☐ NO

Are you involved in a degree program? ☐ YES ☐ NO

If YES, What degree program and where? _____

Did you change from full time to part-time in 2025? ☐ YES ☐ NO

Are you concerned about your call changing from full time to part-time in the next two years? ☐ YES ☐ NO

I am satisfied in my current call. ☐ YES ☐ NO

Do you wish to discuss the possibility of a change of call? ☐ YES ☐ NO

If so, is your request urgent? ☐ YES ☐ NO

Continuing Education Hours:

Contact hours were: _____ (One hour equals 50 minutes of class time or the equivalent.)

Dollars expended: Personally _____ Congregation/Workplace _____ Scholarship dollars received. _____

Compensation

Please provide the information requested below regarding housing and benefits received from your employer during the past year. This information is useful to the bishop in understanding levels of compensation and benefits across the synod.

Compensation:

Housing Provided (in 2025): ☐ YES ☐ NO

Housing Provided (in 2026): ☐ YES ☐ NO

Your call is: ☐ Full-Time ☐ Part-Time

If part-time, what percent? _____ %

Benefits were:

Paid Vacation: Weeks Sundays

ELCA Pension: ☐ 10% ☐ 11% ☐ 12%+

Portico Benefit Services (check all that apply)

☐ Member ☐ Spouse ☐ Children ☐ Coverage Waived

Medical Deductible paid by employer: _____

If pension and/or other benefits are provided by other than or beyond those offered by Portico Benefit Services, please list names of carriers and coverage:

Compensation – Guidelines

Did you and your council do the synod provided guidelines worksheet this year? ☐ YES ☐ NO

Are you receiving guidelines according to the worksheet? ☐ BELOW ☐ SAME ☐ ABOVE

Do you have feedback for the Guidelines worksheet?

Information on this form may be shared with other synod staff persons at the bishop's discretion.

Congregational Vitality

Congregation in this context means: congregation or ministry setting you serve.

Question boxes hold up to 300 characters.
1 is low and 5 is high

Please rate the vitality of your congregation:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Share a story about how the life and spirit (vitality) is in your congregation today.

Please rate the sustainability of your congregation:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Share a story about how your congregation has achieved its level of sustainability.

What would you be interested in learning that can encourage/support the congregation's vitality and sustainability?

What have been the congregation's joys and challenges?

What have been your ministry joys and challenges?

Is there anything you desire to share with the Bishop regarding your congregation?

Partnerships and Collaborations

Question boxes hold up to 300 characters.

What collaborations are you currently involved in?
(include other ELCA congregations, community, ecumenical and interfaith, etc.)

What new ways is the congregation involved in the community/neighborhood?

How is your congregation using your building for the congregation's ministry, collaboration, and the greater community?

As you look forward to the next five years, what is needed to better serve, engage, collaborate with ministry partners and in the community?

Are you currently looking at selling any of the congregation's property? ☐ YES ☐ NO
If so, what are you considering? How are you working in partnership with the synod or other ministry partners?

Does the congregation own a parsonage? If so, is it used as a parsonage or is it used for some other purpose, please explain.

Do you have a physical record book, a "red book", for your church records? (*required) If you also record them digitally, what program(s) do you use?

Is your congregation's constitution up to date as of the 2025 Model Constitution? ☐ YES ☐ NO

Does the Synod have a copy of your constitution? ☐ YES ☐ NO ☐ UNSURE

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