

FORM 9-Dean's Annual Report

As authorized by the Division of Christian Education Accreditation and Credentials of the
Sunday School Publishing Board, National Baptist Convention, USA, Inc

***Submit forms to:** Christian Education Division, P. O. Box : 70990 Nashville, TN 70990-0990
All forms must be typed. Handwritten forms will be returned.

Name (Choose one: Rev., Dr., Dea., Mr., Mrs., Ms., Min.): _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: Home (____) _____ Daytime (____) _____ E-mail _____

Your church home: _____ District Association: _____

State Convention: _____ National Convention: _____

Was the information provided to constituents about the Christian Education *Informer*? ____ Yes ____ No

How was this information disseminated? _____

____ Church Dean ____ District Dean ____ State Dean ____ National Dean ____ Other (List _____)

PART 1

Number of accredited leadership schools held (for which you served as dean)? _____

Staff persons for each school (Please list on a separate sheet)? _____

Total number of students participating in your leadership schools? _____

Total number of classes offered? _____ Total number of certified instructors? _____

Total number of CCE(P) certificates presented at conclusion of school? _____

____ Phase 1 ____ Phase 2 ____ Phase 3 ____ Diploma ____ Teacher Certification

PART 2

1. List the strengths of Christian education leadership training in your school: _____

2. List the weaknesses of Christian education leadership training in your school: _____

3. Identify areas of training that you would like to have offered at your school through the auspices of the regional coordinator of the Sunday School Publishing Board: _____

Comments/Concerns: _____

Signed: _____

Dean

Date ____/____/____

***A copy of this report must be submitted to your State Director and Regional Coordinator.**