

DEFINITION OF COMPENSATION, BENEFITS, AND RESPONSIBILITIES OF THE PASTOR

Prepared by _____

For the Reverend _____

For the period: _____ to _____

A. COMPENSATION

The congregation will provide the following annual compensation:

- | | |
|---|----------|
| 1. Base Salary | \$ _____ |
| 2. Housing Allowance (<i>if provided</i>) | \$ _____ |
| 3. Self-employed Social Security payment allowance (<i>if provided</i>) | \$ _____ |
| 4. If a parsonage or other housing is provided: | |
| a. Utilities allowance | \$ _____ |
| b. Furnishings allowance | \$ _____ |
| c. Housing equity allowance | \$ _____ |

B. PENSION AND OTHER BENEFITS

The congregation will sponsor the pastor in the Pension and Other Benefits Program of the Evangelical Lutheran Church in America, which provides retirement, disability, survivor, and medical-dental coverage. (*Sponsorship will include medical-dental coverage for the pastor's spouse and children unless they have other employer-provided group medical insurance coverage and the pastor consents to waiving medical-dental coverage for them under the ELCA Pension and Other Benefits Program.*)

1. ELCA Pension at _____ % of defined compensation
2. ELCA Medical-and- Dental Insurance (*check one below*)

<input type="radio"/> a. Member only	<input type="radio"/> c. Member and children	<input type="radio"/> e. Coverage waived
<input type="radio"/> b. Member and spouse	<input type="radio"/> d. Member, spouse and children	
3. Other insurance or benefits: _____ \$ _____
_____ \$ _____

C. EXPENSES

The congregation will provide for the following expenses related to this pastor's ministry.

- | | |
|---|----------|
| 1. Automobile and travel allowance | \$ _____ |
| 2. Other professional expenses | \$ _____ |
| 3. Expenses for official meetings of the synod, as reimbursed | \$ _____ |
| 4. Continuing education (<i>\$1,000 recommended, minimum \$700 from calling source</i>) | \$ _____ |
| 5. Clergy coaching | \$ _____ |
| 6. Other _____ | \$ _____ |
| 7. Pay the moving expenses to this field of service as follows: _____ | |

D. AGREEMENT

1. Vacation time of _____ weeks per year, including _____ Sundays;
2. Continuing education time of _____ weeks per year (*recommended minimum of two weeks per year that may be accumulated up to three years, as reflected in a continuing education agreement developed by the pastor and the congregation council*);
3. Participation in a First-Call Theological Education, where applicable (*budget approximately \$200*);
4. Participation in the Bishop's Theological Conference (*budget approximately \$350*);
5. Support for transition into this call through a Clergy Coach;
6. Ongoing care through a Mutual Ministry Committee;
7. Up to two months of continuing salary, housing, and contributions to the ELCA Pension and Other Benefits Program in a 12-month period in the event that the pastor is physically or mentally disabled (*Provision may be made for further unpaid time for disability recovery as agreed by the congregation, but with the stipulation that unused accumulated sick leave will not be compensated at the end of the is call*); and

The In-Between Time: Seven Checklists for Congregation in a Season of Transition

8. Where applicable, parental leave of twelve weeks with full salary, housing, and benefits.

A description of the particular responsibilities of this position may be attached to this "Definition of Compensation, Benefits, and Responsibilities" or the following may be completed.

E. OTHER PROVISIONS

Special emphases of the pastor and special encouragement by the congregation:

1. During this time period, the pastor **will** give special attention to the following:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

2. The congregation **will** encourage and support this pastor's ministry in the following ways:

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

F. OTHER MATTERS

(Such as accountabilities, service on synodical or churchwide boards and committees, work in church-camp programs, or other such details.)

We, the undersigned, certify that the necessary approvals of the congregation and congregational council have been granted for the provisions set forth above.

Congregation President

Council Secretary

Date: _____

I certify that I accept the above statement:

The Reverend _____ Date of signature: _____