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THE UNITED METHODIST CHURCH
ANNUAL REPORT OF CLERGY MEMBER ON LEAVE OF ABSENCE

_____
First Name Middle Last Name

Address _____
Street City State Zip

Home Phone (_____)_____ Office Phone (_____)_____

E-mail Address _____Birthday_____

Conference _____ District _____

Conference Membership: Deacon in Full Connection _____ Elder in Full Connection _____
Provisional Member _____ Associate Member _____

Last appointment served on what district
_____

Number of years on leave of absence (including this year) _____

Present occupation _____

Do you desire to request an end to your leave of absence at the next session of the annual conference?
Yes _____ No _____ If yes, attach a statement outlining your reasons for this request.

Do you desire to request an extension of your leave of absence for the coming appointment year?
Yes _____ No _____ If yes, attach a statement outlining your reasons for this request.

Please attach a copy of your report to the charge conference regarding performances of ministerial duties.

Signature _____ Date _____

*** Note ***

1. Clergy members requesting an extension to their leave must do so by written request (¶354.1).
2. Members seeking to end their leave of absence with an appointment by the bishop must submit their written request to the Board of Ordained Ministry and cabinet six months prior to the session of the annual conference (¶354.11).
3. When clergy members do not request an extension of the leave of absence annually, or do not indicate willingness to itinerate at the end of the five-year period, provisions of location (¶359) or the complaint procedures of ¶363 may be invoked.