



Dependents in addition to your spouse and children:

Name of child	Date of Birth	Sex	Education
_____	_____	_____	_____
_____	_____	_____	_____

Describe your community involvement and volunteer work, such as participation in community organizations, social clubs, service agencies, and other non-church-related volunteer service:

\_\_\_\_\_

\_\_\_\_\_

Your childhood family and other significant relatives:

Name	Relation	Age	Sex	Education	Marital Status	Occupation
_____	<u>Father</u>	_____	_____	_____	_____	_____
_____	<u>Mother</u>	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Your work experience, such as current employment, previous employment, and military experience, if any.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you served as a local pastor, diaconal minister, deacon or elder in The United Methodist Church? Yes \_\_\_ No \_\_\_

If Yes, what Conference? \_\_\_\_\_

**Conference Relationship**

	<u>Indicate Date</u>		<u>Indicate Date</u>
Consecrated Diaconal Minister	_____	Probationary Member	_____
License as a Local Pastor	_____	Deacon in Full Connection	_____
Associate Member	_____	Elder in Full Connection	_____

Have you had a change in clergy relationship with a conference of The United Methodist Church? Yes \_\_\_ No \_\_\_

If Yes, what Conference? \_\_\_\_\_

**Change in Conference Relationship**

	<u>Indicate Date</u>		<u>Indicate Date</u>
Discontinuance	_____	Location	_____
Leave of Absence	_____	Retirement	_____
Disability Leave	_____	Withdrawal	_____
Termination by action of the annual conference	_____		

**\*\*\*Note\*\*\* If additional space is needed, please use a separate sheet of paper and attach to this form.**