THE UNITED METHODIST CHURCH

THE UNITED METHODIST CHURCH ANNUAL REPORT OF CLERGY MEMBER ON LEAVE OF ABSENCE Form 108

Name:				
First	Middle	Last		
Address:				
Street	City	State Zip		
Cell Phone: ()	Oth	er Phone: ()		
E-mail:		Birth Date:		
Conference:		District:		
Conference Membership:				
Provisional Member		Deacon in Full C	Connection	
Associate Member	Elder in Full Connection			
Last Appointment and District:				
Number of Years on Leave of A	Absence (including this	s year):		
Do you desire to request an end	l to your leave of abser	nce at the next session of	the annual conference?	
Yes No	If yes, attach a staten	nent outlining your reaso	ons for this request.	
Do you desire to request an ext	ension of your leave of	f absence for the coming	appointment year?	
Yes No	If yes, attach a staten	nent outlining your reaso	ons for this request.	
Please attach a copy of your rep	ort to the charge confe	erence regarding perform	nances of ministerial duties.	
Signature:		Date		
			URL gbhem.org ohem ADDRESS 1001 19th Avenue, Sou	

Nashville, TN 37212



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*** Note ***

- 1. Clergy members requesting an extension to their leave must do so by written request (¶353.1).
- 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 a minimum of six months prior to the session of the annual conference (¶353.11).
- 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 (¶358) or the complaint procedures of ¶362 may be invoked.