

**THE UNITED METHODIST CHURCH
BIOGRAPHICAL INFORMATION FORM**

Your childhood family and other significant relatives:

Name	Relation	Age	Marital Status	Education	Sex/Gender	Occupation
	Father					
	Mother					

Work Experience: (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

	DATE		DATE
Consecrated Diaconal Minister		Provisional 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

Change in Conference Relationship

	DATE		DATE
Discontinuance		Location	
Leave of Absence		Retirement	
Medical Leave		Withdrawal	
Termination by action of the annual conference			

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