



**Disclosure Form for Service of Clergy from Other Annual Conferences
or Methodist Denominations**

Please complete this form, sign and date it, have your signature notarized, and upload it as a part of your
Approval to Serve application.

Have you ever been:

1. Convicted of a felony: _____ No _____ Yes
2. Convicted of a misdemeanor? _____ No _____ Yes
3. Accused in writing of sexual misconduct or child abuse? _____ No _____ Yes

If you answered yes to any of these questions, please explain below.

I, _____, certify that I understand the above requirements,
I agree with these requirements, and to the best of my knowledge, all of the above statements
are true.

Legal Signature Date

NOTARIZATION

State _____ County _____

On this _____ day of _____, 20____, _____
name

known to me or satisfactorily identified to be the person named above, personally appeared before me,
a Notary Public, within and for the State and County aforesaid, and acknowledged that he/she freely and
voluntarily signed the same for the purposes stated above.

NOTARY PUBLIC Date

My Commission Expires: _____