

Disclosure Form for Service of Clergy from Other Christian 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.

1. Pursuant to ¶346.2 this is to give evidence of my agreement with and willingness to support and maintain United Methodist doctrine, discipline, and polity.
2. I understand that I am required to submit to a criminal background and credit check, and reports of sexual misconduct and/or child abuse.
3. I understand that I am required to submit a Disclosure Form detailing any convictions for felony or misdemeanor or written accusations of sexual misconduct or child abuse; or a notarized statement certifying that I have not been convicted of a felony or misdemeanor, or accused in writing of sexual misconduct or child abuse.
4. I understand that I am required to provide a psychological assessment report or have a psychological assessment completed by the Conference Psychologists within two years of an appointment with the Baltimore Washington Conference of the United Methodist Church.

DISCLOSURE

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.



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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: _____