

The United Methodist Church

Candidate Disclosure Form

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Please complete this form, sign, and date it. Please have your signature notarized. Mail this completed form to the Office of Ministerial Services, Patty LaGree, Director, 2301 Rittenhouse Street, Des Moines, IA 50321.

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. Use the back of this form, if needed.

If you are required by this Disclosure Form to disclose any written accusations or convictions for felony, misdemeanor, or any incident of sexual misconduct that you dispute or believe should be explained in any way, you have an opportunity at this time to include any additional information that you believe might be helpful or important regarding the disclosure. Any relevant additional information should be provided in a response statement attached to this form. (NOTE: It would be preferable if this response statement could be included right on this Disclosure Form, however, we realize there are space limitations on forms and you might need to request that the statement be attached. Please indicate if pages are attached.)

I hereby certify that the information provided on this form is true and accurate.

Print your name _____

Signature _____

Subscribed and Sworn this _____ day of _____ of _____

Date Month Year

Notary Public _____