

**THE UNITED METHODIST CHURCH  
APPLICATION FOR CLERGY RELATIONSHIP TO THE ANNUAL CONFERENCE**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street, City, State, Zip code)

Home Phone: \_\_\_\_\_ School or Office Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Being fully persuaded that God has called me to be a minister of the gospel of our Lord Jesus Christ, I hereby request affirmation of that call by the United Methodist Church through the granting of a clergy relationship to the annual conference. The relationship for which I am applying is:

- Local Pastor
  - Part-time
  - Full-time
- Associate Membership
- Provisional Membership
- Deacon in Full Connection
- Elder in Full Connection

At the same time that I am applying for this relationship to the annual conference, I am also applying for:

- License for Pastoral Ministry
- License for the Ministry of a Deacon
- Ordination as a Deacon
- Ordination as an Elder
- Recognition of orders granted by another denomination

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

An application for membership in full connection is to be sent to Arkansas Conference, BOM Secretary, 800 Daisy Bates Drive, Little Rock, AR 72202.

An application for license as a local pastor, associate membership, or provisional membership is to be sent to both the District Committee on Ordained Ministry and to the BOM Secretary at the Arkansas Conference.