

# NOTICE OF INTENT TO DISCONTINUE

Illinois Great Rivers Conference UMC

Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

Current Appointment: \_\_\_\_\_ Current District: \_\_\_\_\_

Current Status:         Associate Member         Local Pastor

Active  Retired

Year of Licensure for LP's: \_\_\_\_\_

Year of Assoc Membership for AM's: \_\_\_\_\_

Effective Date of Withdrawal: \_\_\_\_\_

## Statements of Agreement

*(Please initial each statement)*

**“Discontinuance of Local Pastor-** Whenever a local pastor retires or is no longer approved for appointment by the annual conference as required in ¶318, whenever any local pastor severs relationship with The United Methodist Church, whenever the appointment of a local pastor is discontinued by the bishop, or whenever the district committee on ordained ministry does not recommend continuation of license, license and credentials shall be surrendered to the district superintendent for deposit with the secretary of the conference. After consultation with the pastor, the former local pastor shall designate the local church in which membership shall be held. The Board of Ordained Ministry shall file with the resident bishop a permanent record of the circumstances relating to the discontinuance of local pastor status as required in ¶635.3d.”

(¶320.1 of the 2016 Book of Discipline)

After prayerful thought and discernment, I have decided that I wish to discontinue as a Local Pastor or Associate Member in The United Methodist Church.

\_\_\_\_ I have researched and understand the implications and impact of this decision on my health insurance (and that of my family), death and disability insurance and my pension.

\_\_\_ I understand that in discontinuing as a Local Pastor or Associate Member, I will no longer be a member of the annual conference or a credentialed clergy person in The United Methodist Church.

\_\_\_ I understand that conference membership was granted to me by the clergy session and that I will be required to surrender my License to Preach and/or Associate Member Certificate.

\_\_\_ I understand that I may no longer refer to myself as a United Methodist minister as of the effective date of my discontinuation.

\_\_\_ I understand that upon completion and submission of all required documents and, assuming I am in good standing with the Illinois Great Rivers Conference, that I will be given a letter upon request from the Bishop's Office indicating that I was, at the time of my discontinuation, a clergy member in good standing of the annual conference.

\_\_\_ I understand that this is not a simple reversible process, but that I would have to reapply to serve in Illinois Great Rivers under the provisions of The Book of Discipline in place at the time I might seek to re-enter the annual conference.

**Signature:**

Having read and understood the above items, I formally declare my desire to discontinue from the Illinois Great Rivers Conference.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

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**District Superintendent Section:**

**Signature:**

Having conversed with and received this application from the above-named pastor, I now pass the required documents to the Annual Conference Secretary for the processing of this withdrawal effective as of the date indicated above.

\_\_\_\_\_  
DS Signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Date

Document forwarding:

Notification of Intent to discontinue as a United Methodist Local Pastor or Associate Member to Episcopal and Ministerial Services Administrator

Local Pastor License or Associate Membership Certificate to the Bishop's Office

Personnel/Supervisory files sent (after effective date) for deposit in the Bishop's Office (hard copy paper files)

**End of District Superintendent Section**