

BOARD OF ORDAINED MINISTRY
CALIFORNIA-PACIFIC ANNUAL CONFERENCE
THE UNITED METHODIST CHURCH

DECLARATION OF SEXUAL MISCONDUCT

Instructions

Please read and complete the following declaration and return the notarized copy to the appropriate registrar of the conference Board of Ordained Ministry. Please type, print, sign, scan, and submit a PDF of the form via email to: Ms. Cathy Wilson at Admin@bom.calpacumc.org.

Candidates seeking to become certified for licensed or ordained ministry: “They shall submit, on a form provided by the conference Board of Ordained Ministry: (1) a notarized statement detailing any convictions for felony or misdemeanor or written accusations of sexual misconduct or child abuse; or (2) a notarized statement certifying that this candidate has neither been accused in writing nor convicted of a felony, misdemeanor, any incident of sexual misconduct, or child abuse.” *Book of Discipline*, ¶310.2b.1,2, 2016 edition.

In light of the above paragraph, please respond to the following inquiries.

Have you ever been:

- | | | |
|--|-----------------------------|------------------------------|
| 1. convicted of a felony? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 2. convicted of a misdemeanor? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 3. accused in writing of sexual misconduct or child abuse? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

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

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 the form. (Note: It would be preferable if this response statement could be included right on the disclosure statement; however, we realize there are space limitations on forms and thus 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.

Printed Name: _____

Signature: _____ Date: _____

Subscribed and sworn this _____ day of _____

Notary Public _____

