Name:				
	First	Middle	l aet	

## **EXPLANATION OF INACTIVE STATUS FORM**

This form will be shared with other District Presidents and calling congregations. It must have both the worker's and the District President's (or his representative's) signature to be valid.

(Please use additional paper to answer fully all questions -- it is essential that your answers are complete.)

1.	Current roster status				
2.	Date current status began (month/day	/year)			
3.	Reason for going on Inactive Status (Check as many as apply)				
	Advanced Degree	Burnout	Conflict	Specialized Certification	
	Team Ministry Problems	Forced Resignation	Voluntary Resignation	Vocational Reassessment	
	Health	Family Concerns	Alleged Misconduct	Finances	
	Military service ended	Missionary service ended	Reduction in Force (RIF)	Candidate Status expired	
	Other (explain)				
4.	Please explain in detail all items check	ked in Question 3.			
5.	Explain what insights you have gained	d through your Candidate/Non-	Candidate Status experience.		
6.	Explain what pro-active measures you	ı have taken in response to you	ur Candidate/Non-Candidate Stat	us experience.	
	·			·	
7.	Comment on your readiness to be cor	nsidered for a Call at this time.			
	<b>,</b>				
8.	Comment on your expectations of a ca	alling congregation/school.			
		- <b>-</b>			

		Name:
9.	List any limitations you feel are important in your consideration of a C	all.
10.	Describe any other matters or circumstances which you feel a calling family.	congregation/school should know about you and/or your
11.	Describe your involvement in ministry while on Candidate/Non-Candidate/N	date Status.
12.	Are there any other personal or professional concerns that the Distric about? Explain fully.	t President or a calling congregation/school should be informed
13.	Please share any other information which you feel would be helpful.	
14.	The answers I have given are true and correct and I consent to this in congregations/schools.	formation being shared with other District Presidents and calling
	Signature of Rostered Worker	Date
15.	To the best of my information and understanding, these answers are	accurate and complete.
	Signature of District President or his representative	Date
	District	

This form must be accompanied by an up-to-date PIF and SET or LEIF form.