

**Virginia Synod, ELCA
Application for On Leave From Call Status**

Applicants full name: _____

Current address: _____ Phone Number: _____

Date of Ordination: _____ Current or most recent call/parish: _____

Nature of on-leave-from-call status requested: Educational Medical Other

Type of request: initial request renewal

Commencement Date requested for "On-Leave-From-Call" status: _____

Have you ever been on leave from call before? No Yes

If yes, list dates of previous leaves and reason(s) for them: _____

Please state the reason(s) you are requesting "On-Leave-From-Call" status:

Please state how the granting of your request for "On-Leave-From-Call" status would serve the interests of the Synod and the Church:

What plans or goals do you have for the period you are on leave?

Will you be available to serve as a supply pastor during your leave? Yes No

What are your employment plans for the period you are requesting on leave status?

Where do you intend to reside during your leave? _____

What plans do you have for maintaining contact with the Bishop and clergy of this Synod during your leave?

How long do you anticipate being “on-leave-from-call?” _____

Are you a defendant in any pending civil or criminal litigation? No Yes

Have you been convicted of any criminal offense in the past 2 years? No Yes

Has anyone threatened to sue you within the past 2 years? No Yes

If you answered yes to any of these last 3 questions, please state the nature, date & circumstances surrounding this conviction or threatened or pending litigation.

Additional comments or information you believe would be helpful to the Synod Council in determining whether to grant you on leave from call status.

Date: _____ Signature of Applicant: _____