

**OREGON-IDAHO ANNUAL CONFERENCE
THE UNITED METHODIST CHURCH
ANNUAL DISCLOSURE FORM**

NAME (Printed) _____

Complete this form, sign and date it, and return it to your district office by mail or scan and attach to an e-mail. Addresses are below.

1. Have you ever been:

a. Convicted of a felony? ____ No ____ Yes

b. Convicted of a misdemeanor? ____ No ____ Yes

c. Accused in writing of sexual misconduct or child abuse? ____ No ____ Yes

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

2. Have you read the Oregon-Idaho Annual Conference's Sexual Ethics Policy in the current Journal? ____ No ____ Yes

If you are required by this 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, please attach any additional information that you believe might be helpful or important regarding the disclosure.

Signature _____ Date _____

Cascadia District Office, 680 State St., Suite 200, Salem, OR 97301 or cascadia@umoi.org
Columbia District Office, 1505 SW 18th Ave., Portland, OR 97201 or columbia@umoi.org
Crater Lake District Office, 440 Maxwell Rd., Eugene, OR 97404 or craterlake@umoi.org
Sage District Office, PO Box 642, Twin Falls, ID 83303-0642 or sage@umoi.org