

**PASTOR'S ADVISORY FORM**  
**For the 2023–2024 Appointment Year**

Please return this form to your  
District Superintendent's Office by November 1, 2022

**Pastor's Name:** \_\_\_\_\_

**Church/Charge:** \_\_\_\_\_

I desire to remain in my present appointment

I wish to be considered for another appointment and would like to meet  
with my superintendent

I am seeking a change in status (retirement, leave of absence, attend  
school, honorable location, part-time, etc.)

Copies of my

Continuing Education Credits for 2021 are attached.

*Signed by:*

**Pastor:** \_\_\_\_\_ **Date:** \_\_\_\_\_