
**CENTRAL STATES SYNOD
ROSTER REPORT FORM
ON LEAVE FROM CALL (OLFC) REQUEST**

Name:		
Address:		
City:	State:	Zip:
Phone (Daytime):	Phone (Evening):	Email Address:

Date of resignation from last call:

On Leave From Call (OLFC) Status is granted by the Synod Council upon approval by the Bishop. Are you requesting OLFC Status?

Yes

No

What is the basis for your request?

Describe the directions/goals that you have established related to your OLFC status.

Describe your specific planned activities for the next 12 months related to this OLFC status.

In what congregation are you a member?

***If you have questions, contact the Synod Office at 913-948-9701.
21 N. 12th Street, #210, Kansas City, KS 66102***