

**Annual Report and Request for Renewal  
ON LEAVE FROM CALL STATUS - GRADUATE STUDY**

Name:   Clergy  
Address:   Lay Professional  
Office Phone:  Home Phone:  - -  
E-mail:

Is the above a new address?  Yes  No

Effective date "On Leave" status:  / /

Where are you studying?:

Advisor or supervisor:

Advisor/supervisor phone number:  - -

Degree or Certification program:

Field of Specialization:

Academic year you began your studies?

What is your current status?  Full-time  Part-time

Expected date of completion:  // Has date changed?  Yes  No

Congregation of membership?

What is your involvement there?

Describe the progress made in the past year.

Name:

**What role do you currently see this field of study playing in your service as a rostered person in the ELCA?**

**What have you done in the past year to keep yourself current with and engaged in the mission and ministry of the Evangelical Lutheran Church in America?**

**What have you done in the past year to keep yourself current with and engaged in the mission and ministry of the Metropolitan Chicago Synod?**

**What is your current involvement on the synod level?:**

Student's Signature:

Date:

Advisor's signature:

Date:

Please mail original signed form to: Mary Richardson, Executive Assistant to the Bishop  
Metropolitan Chicago Synod, ELCA  
1420 W. Dickens Ave  
Chicago, IL 60614-3004

OR e-mail this form as an attachment to the synod office by pressing "Send."