

G.

**Leave of Absence  
COUNCIL MEMBERS MUST RESIGN POSITION  
TO BE ON A LOA**

LOCATION of OCDS Community: \_\_\_\_\_  
City/Town and State where OCDS meeting is held

Religious Title of Community: \_\_\_\_\_  
(Optional)

Member Name: \_\_\_\_\_

Address \_\_\_\_\_

City, State, 9 Digit Zip \_\_\_\_\_

Tel/ E-mail (Home/ Cell) \_\_\_\_\_ (Work) \_\_\_\_\_ (E-mail) \_\_\_\_\_

My current status is:

\_\_\_\_ I am a member in Temporary Promise; I made my Temporary Promise on (date) \_\_\_\_\_  
and understand that the upon my return the Council will discern where I am to be  
reinserted into the Formation Program and how much time is to be added to make  
Definitive Promise.

\_\_\_\_ I am a member in Definitive Promise; I made my Definitive Promise on (date) \_\_\_\_\_

\_\_\_\_ I am a member in Vows; I made my Vows on (date) \_\_\_\_\_

I make this petition to request a Leave of Absence for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I would like this Leave of Absence for \_\_\_\_\_ starting on (date) \_\_\_\_\_.**

**I understand this time is considered absent from meetings and falls under the community attendance policy, which impacts my eligibility to vote in community elections.**

\_\_\_\_\_  
Signature of Member Date

Approved By: \_\_\_\_\_  
Signature of President for the Council Date

**PLEASE SEND A COPY TO:**

Discalced Carmelite Secular Order  
2131 Lincoln Road NE  
Washington DC 20002-1101  
(202) 269-3792

10/10/10