**Ethics Card for CCIW**

*Please read the statement below, sign, and return the card to CCIW, 1011 N. Main Street, Bloomington IL 61701. This card will be placed in your file.*

I acknowledge receipt of and acknowledge I am responsible for knowing the contents of the CCIW *Guidelines for the Review of Ethical/Sexual Misconduct By Ordained or Licensed Church Professionals of the Christian Church in Illinois and Wisconsin*, and the most recent copy of the *Policies and Criteria for the Order of Ministry in the Christian Church (Disciples of Christ).*

Signature:

Printed Name:

Phone:

Email:

Date:

Return this copy to CCIW Office

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