

Concordia Plan Services  
The Lutheran Church - Missouri Synod  
PO Box 229007  
St. Louis, MO 63122-9007



**CONCORDIA PLANS**  
**Intentional Interim Pastor**  
**Status Change Form**

Toll Free: 888-927-7526  
St. Louis: 314-965-7580  
Fax: 314-996-1127

E-mail: [info@ConcordiaPlans.org](mailto:info@ConcordiaPlans.org)

Website: [ConcordiaPlans.org](http://ConcordiaPlans.org)

PLEASE PRINT OR TYPE ALL INFORMATION IN BLUE OR BLACK INK

**Employer Information**

Employer Name		CPS Employer ID #	
Employer Address	City	State	Zip Code
Contact Name	Contact Phone Number	Contact Email Address	

**Member Information**

First Name	Middle Name	Last Name	
Home Address	City	State	Zip Code
Date of Birth	Social Security Number	Preferred Phone Number	
Preferred Email Address	Assignment End Date		

**Member Intentions**

Please indicate your future plans.

It is my intention to actively seek another IIP assignment.

- I understand that I have Benefit coverage through CPS for up to 3 months.
- I understand that when I have a new assignment, I will need to complete a new IIP enrollment form.

I intend to fully retire after this IIP assignment.

**Member Signature**

Member Signature	Date
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Employer Signature	Title	Date
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