

WVCSB INTERNATIONAL MISSION TEAM APPLICATION

(Full Legal Name as appears on Passport)

(Last) (First) (Middle) (Preferred "goes-by" name)

Preferred Phone Number _____ Do you receive texts at this number? _____

Address _____ City _____ State _____ Zip Code _____

Date of Birth _____ Marital Status _____ E-Mail Address _____

Occupation/School _____ Employer _____

Name of your Church _____

Have you ever served on an international mission team? _____

If so, where have you served? _____

I am interested in the mission team going to: _____

When? _____

What gifts or talents would you hope to use on the mission field?

- | | |
|--|--|
| <input type="checkbox"/> Testimony | <input type="checkbox"/> Sports |
| <input type="checkbox"/> Singing | <input type="checkbox"/> Construction |
| <input type="checkbox"/> Musical instrument | <input type="checkbox"/> Children's Ministry |
| <input type="checkbox"/> Preaching | Other _____ |
| <input type="checkbox"/> Teaching | |
| <input type="checkbox"/> Personal evangelism | |

On a scale of 1 to 10, how well-equipped are you to share the gospel with a non-believer? _____

How do you currently serve in ministry through your local church?

Do you speak any foreign languages? _____ If yes, what language? _____

Please list any medical conditions or allergies that the team leader needs to be aware of:

Family Physician _____ Phone # _____ Blood type _____

Emergency Contact _____ Relationship _____

Emergency Contact Phone Numbers _____

Passport # _____ City of issue _____ Date of issue _____

Name of Pastor _____ Phone Number _____

Church Member for Personal Reference _____ Phone Number _____

Please give an account of your salvation experience:

Please, state why you think the Lord may be calling you to be a part of a mission team at this time:

Do you have any concerns about joining this team? _____

If available, please submit a photocopy of your passport with this application

Signature of Applicant

Date

FOR OFFICE USE ONLY

Application received by: _____
(Initial/Date)

Interviewed by Staff: _____
(Name/Date)

Approved for Mission Trip: _____
(Name/Date)

Committed to Participate: _____
(Name/Date)