



SHORT TERM MISSION APPLICATION

Thank you for your interest in short term missions (STM)! To help us get to know you better, each adult applying needs to fill out a separate application. Please print neatly.

What STM trip are you applying for? _____

Date you are submitting this application: _____

PERSONAL INFORMATION

Name : _____

Address: _____

Phone (Home): _____ (Work) _____

Age: _____ Birth date (MM/DD/YYYY): _____

Fax: _____ Email: _____

EMERGENCY INFORMATION

Name of Contact: _____ Relationship: _____

Address: _____ Phone number: _____

HEALTH INFORMATION

Do you have any health problems that might make a trip difficult or one that we should be aware of? _____

If yes, please explain: _____

Blood-type (if known): _____

CHURCH AFFILIATION

Name of home church: _____

Address: _____

Phone: _____ Member or Attendee (Circle one) Since _____

Please briefly describe your church activities/involvement:

EDUCATION/TRAINING/EXPERIENCE

Please list any education or training that could be useful for this trip:

Please list any natural talents/gifts you are aware of:

What is your goal for this trip? (Specifically, what new challenges are you hoping to overcome? In which areas are you expecting to grow?)

SPIRITUAL INFORMATION

Explain how you came to know Christ as your Savior and Lord. Attach a separate sheet if necessary.

If someone were interested in becoming a Christian, what would you say to him/her?

REFERENCES

Please list 3 references who have known you at least one year. At least one should be a pastor/ministry leader.

<u>Name</u>	<u>Relationship</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

FUNDRAISING

Do you understand the cost involved with your particular trip?

Are you willing to commit yourself to the process of training and preparation for your Team's mission trip and to being a positive participant on this team?

Applicant's Signature

Date

Please return the completed application to the trip Leader or Missions office.

Mail to: Calvary Church

Attn: Natalie/Missions

PO Box 1600

Grand Rapids, MI 49501