

Graduates & Career Mission Trip APPLICATION

YOUR FULL NAME (as appears on Passport. This will be used for Airline Tickets):

Mr. Mrs. Miss _____

Name you prefer to be called: _____

Street Address: _____

City _____ ST _____ Zip _____

Phone: _____ Date of Birth: _____

Email Address: _____ Passport # _____

- | | | |
|-------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Have you ever led anyone to Christ? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you willing to be trained in evangelism? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you willing to share your faith with an individual? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you willing to share or speak to a group in a church setting? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

2. How did you come to know Jesus Christ personally?

3. In what ways have you grown and developed in your faith since coming to Christ?

4. How would you describe the Gospel?

5. State briefly your interest in missions.

6. List your top 3 reasons for believing the Lord is leading you to participate in this mission trip.

7. Do you have any experience in unfamiliar cultures? How would you handle an interaction or cultural experience that made you uncomfortable?

8. Do you have any medical problem, disease, or physical condition that you are currently being treated for?

Yes No If yes, please explain. _____

9. I submit that the above information is accurate and true to the best of my knowledge. I understand that in the event the above information should be found to be untrue, it will result in forfeiting my right to be a part of the mission trip.

Signature

Date

****All requests for other travel must be approved by Stephen****