

### Volunteer Project Participation Application

This form is for team leader mission trip selection use only. Please save this document in this format: LastnameFirstnameBoston2022.

Today's Date:

Name:

Last	First	MI

Informal Name:

Sex: M or F

Address:

Best phone:

E-mail address:

Birth Date:

Marital Status:

Spouse's name:

Occupation: (If retired please give your former position below.)

Name as printed on your government issued ID:

Emergency Contact person, relationship to you and phone number:

Are you willing to pay the expenses for this mission trip? Please type **Yes** or **No**

1. Describe your cross-cultural living, training and/or travel experiences. What did you learn?  
What types of difficulties did you experience?

2. How do you know that God has called you to this project?

3. I plan on: (please type all that apply)

A) Paying my own way

B) Paying part of my way and trusting God to provide the balance

C) I will need God to provide all the finances.

D) I need help learning how to develop my financial support

4. Please describe your (a) strengths, (b) ministry gifts or skills and (c) spiritual gifts.

5. Please describe your weaknesses.

6. Describe your personal devotional habits (i.e. quiet time, prayer life, worship life, etc.) and involvement at your church.

7. Describe your growth and involvement in intercessory prayer. What books on personal prayer have you read recently?

8. Describe your personal knowledge of and interest in the people of Boston.

9. How do your immediate family members feel about you applying and/or going on a volunteer trip?

10. Please note, any positive answers to the following questions do not necessarily disqualify you. All responses will be kept strictly confidential.

**a.** Are there any unresolved moral issues in your life that you need to speak to Christian leadership about? If you desire to discuss the previous question "a" with your pastor, please indicate the date we can expect to hear from either you or your pastor. If your answer to "a" is yes, have you spoken to Christian leadership about this?

**b.** Do you use any of the following substances? (i.e., tobacco products, alcohol, drugs)? Yes or No. If yes, please describe your usage.

11. Explain any difficulties you may have working with Christians who have doctrinal viewpoints different from you.

12. Suppose you felt the team should take a direction or act differently than what your team leader instructs. How would you handle this?

13. What type of evangelism training have you had? What type of evangelism training do you feel you need?

Signature: (Please type below)

Date: