

Short Term Missions Team Application

ESSENTIAL REQUIREMENTS:

- □ PRAY- ASK IF GOD WOULD HAVE YOU JOIN and IF SO, FILL OUT THIS APPLICATION
- □ PASSPORT (VALID and not expiring within 6 months of travel)
- DEPOSIT OF \$200 (due before team selection to show investment)
- □ TEAM SELECTION (based on references and application)
- □ WILLINGNESS/ABILITY TO ATTEND TEAM MEETINGS/TRAININGS (6-8)

I am applying for: Country/Year _____

Essential Details		
Name <u>as it appears on</u>		
passport:		
Name you prefer (if different		
than above):		
Passport Number and expiry		
date:		
Address:		
Phone:		
E-mail:		
Date of Birth:		
Do you have a criminal		
record? You may be		
required to submit a criminal		
record/vulnerable sector		
check by partners.		

Special Dietary Restrictions?	
Any current medical or	
personal issues/concerns	
that could limit your ability	
to serve well on this team?	
Please comment on your	
willingness to fundraise	
individually or as part of the	
team.	
Share any cross-cultural	
experience.	

Motivation for Application		
Please describe why you feel motivated to join this team?		

What, if any, are your goals or expectations for being on this team?

Background	and Story
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Please give a short description of your journey to faith in Jesus <u>and</u> where you are now in that journey?

How do those closest to you witness your relationship with Jesus? The Church? Others?

List any unique skills, experience or traits that may contribute to the success of this team? What do you bring to the team? (adventurous, outgoing, teachable, adaptable, hardworking, previous teams, language skills, prayer warrior, childcare, youth work, teacher, encourager, agricultural background, education training, coaching or sports, etc.)

Do you or any significant person (parents/spouse/children) have any questions or concerns?

Contact and References	
Church where you attend <u>or</u> are a member:	
#1 Name of pastor or spiritual leader who knows you personally:	
Contact # & Email of Pastor or Spiritual	
Leader (if not from CrossRoads Church):	
#2 Name of Other reference (friend, co-	
worker, mentor, etc.):	
Other Reference Contact # & Email:	
Is your family/support system behind this	
decision?	
Is there anything about your current family	
or home situation that we should know of?	

Please return to Main Church Office/HUB or e-mail to Missions@CrossRoadsChurch.ca

Date Received: