

# Application for Short-term Global Service

## Southwood Presbyterian Church

1000 Carl T. Jones Drive Huntsville, AL 35802 (256) 882-3085 x115

To be considered for a short-term mission project you must complete and submit the following application to the Community Development department. All applicants will also be interviewed personally.

Your application must include:

- 1) your signed and completed application
- 2) recommendations from 2 references

We will schedule your personal interview following the submission of these two items.

If accepted, you must agree to attend the mandatory team meetings as scheduled by your team leader.

### PERSONAL INFORMATION

Male  Female

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Telephone Numbers** Home: \_\_\_\_\_ Cell: \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

E-mail: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### PASSPORT INFORMATION

(if project is outside of U.S.)

Do you have a passport?  Yes  No

If yes, list your passport number: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as found on passport: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

City/State/Country of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## EMERGENCY INFORMATION

In case of an emergency while on the mission project, please notify:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Telephone Numbers** Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

## HEALTH

Please state any major illness(es) you have had in the last five years.

\_\_\_\_\_

Current medications: \_\_\_\_\_

Please list any allergies you have. \_\_\_\_\_

Please list the name and phone number of your primary physician. \_\_\_\_\_

Are you presently under the care of a physician?  Yes  No

If yes, please explain. \_\_\_\_\_

## REFERENCES

Please provide the contact information for two references. One should be a ministry leader with whom you have served. The other reference should be someone who knows your ministry abilities as well as your strengths and weaknesses. These references should complete and return the attached recommendation form.

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Telephone Numbers** Home: \_\_\_\_\_ Work: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Telephone Numbers** Home: \_\_\_\_\_ Work: \_\_\_\_\_

**CHURCH INVOLVEMENT**

Are you a member of Southwood Presbyterian Church?  Yes  No

If yes, how long? \_\_\_\_\_

If no, with which church are you a member and for how long? \_\_\_\_\_

Please list the ministries with which you have been involved. (Please list the time of involvement, any leadership positions held, and the organization /church which was responsible for the ministry).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list previous missions experience:

Country	Church/Mission Organization	Dates of Project	Ministry
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

**MOTIVATION**

Please explain briefly what you hope to see the Lord do in and through you on this mission project and explain why you want to participate.

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\_\_\_\_\_  
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