

APPLICATION - Liberty Church Short Term Missions Trip

Checklist

1. Review information packet
2. Fill out this application
3. Submit application and non refundable deposit
 - a. Non refundable deposit of \$200 made out to Liberty Church
 - b. Mail to Liberty Church 2221 S. Blue Angel Pkwy, Pensacola FL 32506 ATTN Jenn Finch
4. Submit a recent photo with application
5. Apply for Visa (see VISA Application instructions)
6. Begin to raise funds for your trip (see fund raising instructions)

Approx. Cost of Asia Trip = \$1800 - \$2400

Mission Trip Destination: _____ Date: _____

GENERAL INFORMATION: (please print)

Name (as printed in passport for airline tickets) _____
Address _____
City _____ State _____ Zip _____ E-mail _____
Home Phone _____ Work Phone _____ Cell/Beeper _____
Age _____ Male__ Female__ Nickname _____
Citizen of what country _____ Do you have a valid passport? _____
Passport # _____ Expiration date of passport _____
Date of Birth _____ Marital Status: __ Single__ Married_ Divorced
Spouse's Name: _____ Spouse's Occupation: _____
Children's Names and ages: _____

SPIRITUAL INFORMATION:

1. Is Liberty Church your home church _____
What Campus do you attend _____
If not, where do you attend _____
How long have you attended _____
2. Do you serve in any volunteer/leadership role in any ministry or outside the church _____
3. What do you think your spiritual gifts are _____

6. Please name a pastor or leader at Liberty Church who could give you a reference: _____
7. Please list two people who know you and your spiritual walk (name and phone #): _____

8. Please describe how and when you came to know the Lord: _____

9. Have you been water baptized _____
If yes, where and when _____
10. Have you ever served on a mission trip, or had any cross-cultural experience _____
If yes, where and when _____
11. Please explain briefly why you want to participate in this mission trip. _____

WORK EXPERIENCE/TALENTS:

- 1. Please list any specific talents that you have. (drama, singing, instruments, puppets, construction, medical, teaching, etc.) _____
- 2. Do you speak any foreign languages fluently _____
- 3. What do you see as your strongest character quality and why _____
- 4. What do you see as your weakest character quality and why _____

HEALTH INFORMATION:

- 1. Do you have or have you ever had:
 Fainting Spells Heart Problems Diabetes
 Eating Disorder Respiratory Problems Seizures
- 2. Do you have any condition which might affect your ability to fully function as a missionary on this trip (i.e., fear of flying, depression, anxiety, sleeping disorders)? _____
- 3. Do you have any chronic illnesses or allergies? Yes No If yes, explain: _____
- 4. Are you presently under medication prescribed by a doctor? Yes No If yes, explain: _____
- 5. Have you ever had any psychiatric care or treatment? Yes No If yes, explain: _____
- 6. Please list any hospitalization history: _____
- 7. Does your health insurance cover you overseas? Yes No
- 8. How would you describe your health and fitness? Excellent Good Average Needs work

PERSONAL INFORMATION:

- 1. What are your personal expectations for this trip? _____
- 2. If you are in a dating/engaged relationship, is this person applying to serve on the same mission team? Yes No
- 3. Have you been involved with any of the following within the past year?
 Alcohol or Tobacco Illegal Drugs
 A Cult or the Occult Criminal Activity
- 4. Have you ever been convicted of committing a crime? Yes No If yes, explain: _____

The information I have given Liberty Church is accurate and true to the best of my knowledge. My signature signifies my approval of all limitations listed above.

Signature of Applicant: _____ **Date:** _____