

**Application for International Volunteer Service**

*This application is designed for those who feel a calling to serve as a short-term volunteer alongside a long-term global servant or international partner organization.*

**INFORMATION:**

* **Please** feel freeto contact the Short-Term Mission (STM) office at 610-768-2168 or via [volunteers@internationalministries.org](mailto:volunteers@internationalministries.org) if you have questions about this application. We will be happy to assist you along the way. Each question may be answered by simply typing into the field. The field will expand to allow as much room as needed for an answer. If you are not using an electronic version, please use a separate sheet for answers as necessary.
* Ask your pastor to complete a reference form. If your pastor is a member of your family, please provide a reference from another person who has functioned in a pastoral role (executive minister, area minister, campus or youth pastor) but is not a family member. If you are stuck on this, call us… we will help figure out a solution. Two other reference forms should be provided to individuals that can comment on your character, maturity, skills, and abilities, also not your family members. All reference reports should be directly emailed, mailed or faxed (610-768-2115) by the references to the STM office at International Ministries.
* **Please Note:** AIG insurance does not provide complimentary medical evacuation, nor repatriation insurance to short-term volunteers traveling to Afghanistan, Russia-North Caucasus, Iran, Iraq, Israel (West Bank and Gaza), Libya, Pakistan, Somalia, Yemen.
* Mail or email this signed application to:

International Ministries

Attn: Short-Term Mission

1003 W 9th Ave., Ste A

King of Prussia, PA 19406

* Thank you

**CONTACT INFORMATION:**

Last Name: First Name:  Middle Name:

Preferred Name:

Street Address:

City:  State  Zip Code:

Home Phone:  Work Phone:  Cell Phone:

Email:

Gender:  Date of Birth:  Citizenship:

Do you have valid passport?

Name on Passport:

Passport Number:

Passport Expiration Date:  Ethnicity (Optional):

Do you presently have a long-term/career application on file with International Ministries  ?

Are you also exploring missionary service with other organizations?  Which one *?*

**CHURCH INFORMATION:**

Current Church:

Denomination:

Street Address:

City:  State  Zip Code:

Phone Number:

Pastor’s Name:

Are you a member?  If so, for how long?

We might need to contact your pastor to offer information about your particular service opportunity as well as resources regarding prayer and spiritual guidance and encouragement before, during, and after your volunteer experience. Do we have your permission to contact your pastor, (if necessary)?

If not your pastor, please provide name and contact info here:

**EDUCATION & TRAINING:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name of School | Area of Study | Degree | Year |
| High School |  |  |  |  |
| College |  |  |  |  |
| Post Graduate |  |  |  |  |
| Seminary |  |  |  |  |
| Vocational School |  |  |  |  |
| Certification |  |  |  |  |

Please share any hobbies and activities:

**FOR MEDICAL PERSONNEL ONLY:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employment/medical practice** | | | | | | | | | |
| Occupation |  | | | | | | | | |
| Job Description | | |  | | | | | | |
| **Medical personnel complete this section:** | | | | | | | | | |
| Specialty(ies) | |  | | | | | | | |
| Practicing:  Full-time  Part-time  Retired (20  )  Student in       year  Intern | | | | | | | | | |
| Resident in       year of      year program  To complete 20 | | | | | | | | | |
| Board Certification(s) | | | |  | | | | | |
| Current Staff/Faculty Appointments | | | | | | | | | |
|  | | | | | | | | | |
| Current Medical License #. | | | | |  | Issued at |  | Expires |  |
| Professional Organizations | | | | | | | | | |
|  | | | | | | | | | |
| Are you presently involved in malpractice litigation?  Yes  No (If “yes,” please explain ) | | | | | | | | | |
| Do you have malpractice insurance?  Yes  No If yes, provide details: | | | | | | | | | |

**EMPLOYMENT:**

List the last three positions you have held and include the following information:

(your resume may be submitted for this question if preferred)

|  |  |  |  |
| --- | --- | --- | --- |
| Position Held | Summary of Responsibilities | Employers Name and Contact Information | Dates Employed |
|  |  |  |  |
|  |  |  |  |
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**ASSIGNMENT PREFERENCES:**

Please be as specific as possible.

How many weeks, months, or years are you available to serve? (Minimum for short-term assignment is two weeks)

When are you available for this amount of time?

What would your ideal volunteer service look like?

What gifts and abilities do you believe you could contribute on the mission field?

What specific age group do you prefer to work with?

What are your preferences regarding the continent, country, and location of service?

What particular people group or specific long-term global servant are you feeling called to serve with?

What housing options, including home stays with families, will you consider?

Please list any dietary restrictions or allergies.

**CROSS CULTURAL EXPERIENCE/VOLUNTEER SERVICE:**

Share any previous international experiences. Where did you visit, when, and what did you do? This can include vacation, business, or mission related trips.

What did you learn through these experiences applicable to international volunteer service?

List languages you know and your level of proficiency on a scale from 1-5- (1 being beginner and 5 being fluent).

* Native Language:
* Other Languages you speak:

Please share how you have served as a volunteer in your community.

Describe your interaction with people of other cultures in your community or in some other settings.

How do you seek to resolve interpersonal conflict?

**HEALTH:**

A separate medical release form will be completed by you and your medical professional upon acceptance to a volunteer position.

Do you have any medical conditions or health problems that may limit your ability to perform tasks involved on the mission field?

Do you, your medical professional, and your pastor consider you physically, emotionally, and spiritually fit for international mission service?

**CONDUCT:**

Have allegations of misconduct, including but not limited to sexual harassment, exploitation or misconduct, physical abuse, child abuse, or financial misconduct:

• led to civil, criminal or ecclesiastical complaint(s) being files against you?

• led to your resignation or termination from a position?

• led you to resign or terminate your employment to avoid such charges?

• led to charges against you being brought before a professional committee?

• led to your being the subject of the official disciplinary actions by a professional committee?

• led to your conviction of a felony?

Has your driver’s license ever been suspended due to reckless driving, or driving while intoxicated?

**FINANCES:**

For several longer-term teaching positions, all travel and living in country expenses are covered by the host partner. For a variety of other positions, the partner may be able to contribute a modest amount to offset some volunteer related expenses. However, in the vast majority of places of service, volunteers can expect to pay for all the costs associated with the experience including housing, food, transportation, and incidentals.

What might be the main sources of your financial support?

**FAITH:**

Please share about your relationship with Jesus Christ and your growth in the faith.

How does your relationship with Jesus Christ relate to your interest in volunteer service?

Please describe any positions you have held within your church as well as other ministry related organizations.

**FAMILY:**

Describe the level of support and encouragement you are receiving from family and from friends as you apply for international volunteer service.

Will anyone be serving alongside you? If so, please share below their name and relationship to you. (If 18 or older, they will need to submit a separate application)

**REFERENCES:**

Please provide information below on the three persons who will complete a reference report on your behalf. One should be from your current pastor and the other two should be from individuals who know you well and can comment on your maturity, character, skills, experience, and readiness for international volunteer service. None can be related to you.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Relationship | Address | Phone # | Email |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**PHOTO:**

Please email or attach a photo (optional)

As part of our communications activity, International Ministries occasionally uses photography for publicity purposes. May we have your permission to include photographs taken during your time of service in our publications, website and other publicity material.

**MISCELLANEOUS:**

If there anything else you feel is important to share, please add it here.

**ACCEPTANCE OF CONDITION OF SERVICE:**

1. I support the mission of International Ministries to “glorify God in all the earth by crossing cultural boundaries and invite others to follow Jesus Christ.
2. I am prepared to abide by the provisions of the Volunteer Service Manual.
3. I seek international volunteer service knowing this lifestyle may involve challenges such as living on a limited income, heavy personal and group responsibilities, living without modern conveniences, and working in an isolated community.
4. I am willing to give up any personal habits which might lessen my influence as a cross-cultural Christian.
5. I am committed to learning about the culture and language of my place of service.
6. I will submit to the authority of long-term global servants and partners.

The statements I have given above and in all supporting documents express my prayerful response and understanding of God’s call to me to serve as a volunteer with International Ministries.

I understand that if I am appointed for volunteer service by International Ministries, I will serve subject to the authority of International Ministries to regulate the term of service and to terminate my service at any time. I also have the right to terminate my service if I deem it necessary. Through my witness, I will support the outreach and witness as well as carry out the policies and programs of International Ministries, abide by its rules and decisions, and cooperate with its staff and global servants as well as with International Ministries’ international partners.

I understand that whether I am selected to participate in a short-term mission is in the complete discretion of International Ministries.

I have read, understood, and agree to abide by all the statements on this application and have provided truthful accurate information in response to the questions, to the best of my knowledge.

Signature: Date: