Application for Mission Opportunities Bethel Baptist Church Missions Ministry

1004 Yorktown Road, Yorktown, VA 23693

Please adequately complete all information

| Personal Information: | | | |
|---|---|--------|--|
| Name | Date | | |
| Address | | | |
| City | State | | |
| Phone # (Home)(Wo | rk)Email | | |
| Date of Birth | | | |
| Passport # | Issue Date/Exp. Date/ | | |
| MaleFemale Marital Sta | atusSingleMarriedWidowedDiv | vorced | |
| Spouse's Name | Does your spouse support your decision to go? | Y N | |
| Have you ever been arrested for a felony? | YesNo (If answered yes, please explain) | | |
| In case of emergency, please notify: | | | |
| Name | Relationship | | |
| Address | CityStZip_ | | |
| Phone # (Home) | (Work) | | |
| Volunteer Field Information: | | | |
| With which mission project will you serve | ? | | |
| Dates of the Project | Field Assignment (Country) | | |
| Please list any foreign language training a | nd your level of proficiency | | |
| | | | |

| How would you describe your pre | esent health?Excellent _ | GoodAvera | gePoor |
|-------------------------------------|---------------------------------|-------------------------|---------------|
| Please include any major illness(e | es) you have had within the las | t five years | |
| | | | |
| Are you presently under the care of | of a physician?Yes | No | |
| If yes, please explain | | | |
| | | | |
| Please list any medications you ar | re currently taking | | |
| | | | |
| Please list any allergies you have_ | | | |
| | | | |
| Deferre | | | |
| References: | | | |
| Please provide two references. O | ne should be a BBC minister of | or teacher in an area v | where you are |
| currently serving or have served. | | | |
| Reference One (BBC minister/te | acher) | | |
| Name | Relationship | | |
| Addresss | City | St | Zip |
| Phone # (Home) | (Work) | | |
| Reference Two (Other) | | | |
| Name | Relationship | | |
| Addresss | City | St | Zip |
| Phone # (Home) | (Work) | | |

Health:

| Please indicate any | special skills, talents, or Christian service | e experience that you feel may be helpfu |
|-----------------------|---|---|
| | | |
| Please list any mis | ssion experience: | |
| Country | Mission Organization | Dates Minist |
| | | |
| Involvement: | | |
| As a member of Be | ethel Baptist Church, your personal involv | vement and faithfulness is important. |
| Furthermore, as a p | ootential volunteer in missions, your faithf | fulness is even more critical. Before any |
| candidate is place of | on a mission team, the following crucial re | equirements must be considered. |
| 1. Belief - Are you | a born-again Christian?YesN | io . |
| 2. Attendance – A | re you a faithful member of a small group | o discipleship class:YesNo |
| 3. How long have | you been a member of Bethel Baptist C | Church? |
| Please list the mini | stries you have been involved in at Bethel | l (Please make sure to include the length |
| involvement and le | adership positions held, if any). | |
| Ministry | Length of Involvement | Leadership Role |
| | | |
| | | |

Testimony:

| In the space provided below, please share your personal testimony. Please be sure to include how long |
|---|
| you have been a believer |
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| Please explain briefly what you hope to see the Lord do in and through you on this mission trip |
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