

# Wings of Light® International Ministries

## Missions Application

### Personal Data (please print or type)

Legal Name \_\_\_\_\_

Passport Number \_\_\_\_\_ Date of Issue \_\_\_\_\_ Expiration Date \_\_\_\_\_

\*\*\*\* (Your *Passport MUST be valid for at least 6 months beyond your date of arrival*)

\*\*\*\* (Your *Passport MUST also have at least 2 blank pages, not including endorsement pages*)

Name As It Appears on Passport ( Please write clear) \_\_\_\_\_

Nickname \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Please Indicate the Best Way to Reach You \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

U.S. Citizen? \_\_\_\_yes \_\_\_\_no

T-Shirt Size: \_\_\_\_Small \_\_\_\_Medium \_\_\_\_Large \_\_\_\_XXLarge \_\_\_\_XXXLarge

### Emergency Contact Person:

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

Address \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_

Relationship: \_\_\_\_ Parent \_\_\_\_ Spouse \_\_\_\_ Other \_\_\_\_\_

Health Insurance: \_\_\_\_ Yes \_\_\_\_ No Life Insurance: \_\_\_\_ Yes \_\_\_\_ No

### Personal History

Have you ever been on a mission trip before? \_\_\_\_yes \_\_\_\_no

Outline mission trips taken. Include how long you were on each trip, where you went, what impact each trip had on your life:

Trip Name: \_\_\_\_\_

Trip Date/Year: \_\_\_\_\_

Lessons Learned: \_\_\_\_\_

Trip Name: \_\_\_\_\_

Trip Date/Year: \_\_\_\_\_

Lessons Learned: \_\_\_\_\_

## Education/Occupation

State and describe present employment and any pertinent information regarding work experience related to mission vocational choices \_\_\_\_\_

Name of school you attend (if applicable) \_\_\_\_\_

Year in School \_\_\_\_\_

Major/Minor \_\_\_\_\_

Current Church Membership \_\_\_\_\_ Length of Membership \_\_\_\_\_

Church You Currently Attend \_\_\_\_\_

Do You Attend On A Regular Basis?  Yes  No

Have You Served in a Ministry?  Yes  No

Where? \_\_\_\_\_

Are You Involved In A Small Group Bible Study?  Yes  No

Which one? \_\_\_\_\_

What Ministries/Organizations Are You Involved In?

## Skills and Talents

Please write the appropriate CODE next to your skills/talents.

**NE**= No/little experience   **AVG**=Average   **GOOD**=Better than average   **PROF**=Professional

Construction \_\_\_\_\_ Medical \_\_\_\_\_

Ministry \_\_\_\_\_ Computer \_\_\_\_\_

Other experience: \_\_\_\_\_

What would you like to contribute? \_\_\_\_\_

## Health

My health is \_\_\_\_\_ excellent \_\_\_\_\_ good \_\_\_\_\_ fair \_\_\_\_\_ poor

If not Excellent, Please describe: \_\_\_\_\_

Medications List: (Now or on the trip) \_\_\_\_\_

**Medical Information:**

Immunizations:

Tetanus Series \_\_\_\_\_ (suggested)      Yellow Fever \_\_\_\_\_ (Mandatory for Africa)

Hepatitis A Series \_\_\_\_\_ (Suggested)      Other \_\_\_\_\_

Hepatitis B Series \_\_\_\_\_ (Optional)      Malaria Pills \_\_\_\_\_ (Mandatory for Africa)

Do you have any restrictions that would prohibit you from lifting? \_\_\_\_\_ What weight can you lift safely \_\_\_\_\_

General Health Status \_\_\_\_\_

Describe: \_\_\_\_\_

**Please read the following statement carefully, Then sign and date below:**

**I understand that I will be representing both Jesus Christ- the King of kings and Lord of lords- and Wings of Light International Ministries on this mission trip. I understand that smoking, use of alcohol or illegal drugs, and fornication is prohibited, and will Not be tolerated on this trip. I understand that I strive to work peacefully with those in charge, and my co-laborers on this mission trip. I understand that failure to abide by the above will result in appropriate disciplinary action as deemed necessary by those in charge of this mission trip- which may include my early return home from the trip. I also understand that any additional expenses incurred by my failure to abide will be my sole responsibility.**

SIGNED: \_\_\_\_\_      DATE \_\_\_\_\_

Printed Name: \_\_\_\_\_

**OFFICE USE ONLY:**

Mission Trip: \_\_\_\_\_

Date Form Completed: \_\_\_\_\_

Deposit Fees Completed: \_\_\_\_\_