



Mission Team Application

GENERAL INFORMATION

Applicant Name: _____
Last First MI

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email Address: _____

Birth Date: ____/____/____ SSN: ____-____-____
(MM) (DD) (YYYY)

Gender: Female Male U.S. Citizen? _____
(circle)

Marital Status: _____ Spouse's Name: _____

Number of Children: _____



PASTOR REFERENCE

Name: _____
Last First

Church's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (_____) _____ - _____ Email: _____

PERSONAL REFERENCE

Name: _____
Last First

Relationship to Applicant: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (_____) _____ - _____ Email: _____

PROFESSIONAL REFERENCE

Name: _____
Last First

Title: _____ Company's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (_____) _____ - _____ Email: _____



MINISTRY/MISSION EXPERIENCE

Church of your membership: _____

Address of Church: _____

City: _____ State: _____ Zip Code: _____

Pastor's Name: _____

Ministries in which you are involved: (i.e. Sunday School teacher, worship leader)

In which of these areas do you feel God has gifted you? (Please check)

Yes No **Personal evangelism/witnessing**

Yes No **Preaching**

Yes No **Teaching**

Yes No **Music Performance/leadership**

Yes No **Youth leadership**

Yes No **News writing**

Yes No **Photography**

Yes No **Other Skills**

If you have gone on a mission trip, briefly describe your involvement and where you served:

Do you speak Spanish? _____ Could you serve as an interpreter if needed? _____

Assignment preference for this mission project:

interpreter music preaching/evangelism teacher (of _____)
 general support construction children's ministry



PERSONAL TESTIMONY
(Use Additional Sheet if Necessary)

Please tell us about your salvation experience:

Please tell us about one way God has shown Himself in your life recently:

Why do you want to go on this trip?

What are your expectations for this trip?



TEAM EXPECTATIONS

The following statements represent attitudes and behaviors that will contribute to a successful, God-honoring mission trip:

1. Be prayerful, in the Word and dependent on the leadership of the Holy Spirit.
2. Be in attendance at all preparation and training meetings prior to the trip.
3. Be conscientious to serve with excellence and have a “whatever it takes” attitude.
4. Be humble and have a servant’s heart toward nationals, missionaries and teammates.
5. Be positive in my conversations and actions and open to other people’s methods and ideas.
6. Be submissive to the authority of my team leader and host missionaries.
7. Be FLEXIBLE.
8. Be respectful of the culture in which I serve.
9. Be thankful for the privilege of serving.
10. Be willing to abstain from the use of alcohol, tobacco or any other behavior that may be considered disruptive to the purpose of the trip. I understand that these behaviors are grounds for dismissal from any volunteer project and I will return home at my own expense.
11. Recruit Prayer Team.

If selected for a Youth Frameworks Mission Team, I agree to work cooperatively with Youth Frameworks and with fellow team members. I am in good health and will be able to meet any physical challenges which may arise in the course of the trip. I agree to be flexible in working with others and to make changes as needed. I agree to be sensitive to cultural differences in my country of service. I agree to participate in training meetings. I agree to show Christ’s love in all relationships. I agree not to partake of any alcoholic drink, tobacco products, or illegal drugs while on the trip. Most importantly, I agree to go with a servant’s spirit, seeking to honor Christ in all that I say and do.

Applicant’s signature: _____ **Date:** _____



PASTOR RECOMMENDATION

Applicant: Please fill in your name and give the form to your pastor.

Applicant's Name _____
Last First MI

Pastor: Please complete the recommendation and send it to:

Youth Frameworks, PO Box 2002, Henderson, TX 75653

DO NOT RETURN RECOMMENDATION TO THE APPLICANT.

Name _____

Phone: (_____) _____ - _____ **Email address:** _____

Please read the following before filling out this recommendation: Serious consideration will be given to your evaluation of the applicant's character and fitness for short-term missions. We need to know as much as possible about our applicants to make fair appraisals of their qualifications, matching all applicants with the best possible ministry opportunity for them. Your responses will be strictly confidential. Should you have any questions, email info@youthframeworks.com.

Is the applicant currently a member of your church? _____ **Yes** _____ **No**

How long have you known this person? _____

Number of years/months this person has actively been living for the Lord? _____

Which of the following best describes this person?

SKILLS	1 is LOWEST, 5 is HIGHEST					CHARACTER	1 is ALWAYS, 5 is NEVER				
Adaptability	1	2	3	4	5	Procrastinates	1	2	3	4	5
Servant Life	1	2	3	4	5	Critical	1	2	3	4	5
Dependability	1	2	3	4	5	Irritable	1	2	3	4	5
Spiritual Life	1	2	3	4	5	Depressed	1	2	3	4	5
Maturity	1	2	3	4	5	Argumentative	1	2	3	4	5
Response to Authority	1	2	3	4	5	Domineering	1	2	3	4	5
Leadership Ability	1	2	3	4	5	Rebellious	1	2	3	4	5

If you answered with a 1 or 2 to any of the above questions please explain here:

Based on your personal knowledge of this person, would you recommend that they participate in a Youth Frameworks mission trip? _____ **Yes** _____ **No**

If No, please explain:

Pastor's signature: _____ **Date:** _____



STATEMENT OF RISK

I understand that any mission trip includes an inherent level of explicit and implicit risk. Such hazards and risks include, but are not limited to, death or injury by willful acts, travel accidents, disease, terrorist acts, weather conditions, improperly prepared or contaminated food, and inadequate medical facilities and supplies. Further, I have reviewed the information about the mission trip country found on the Consular Sheets produced by the U.S. State Department at the following web site:

http://travel.state.gov/travel/cis_pa_tw/cis/cis_1765.html

I knowingly accept the risks of participating in this mission trip.

Applicant's signature: _____ **Date:** _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge and authorize Youth Frameworks to verify their accuracy and to obtain reference information on my work performance. I hereby release Youth Frameworks from any and all liability of whatever kind and nature, which at any time, could result from obtaining and having a selection decision based on such information.

I understand that if selected, falsified information of any kind or omissions of facts called for in this application shall be considered sufficient basis for removal.

I understand that if I am selected, I will fully adhere to Youth Frameworks policies, procedures and rules. In addition, I understand that any selection is contingent on being able to physically perform the required work for the position I am applying.

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

My Commission Expires On:

Notary Public – Signature/Seal

Sworn to and Signed Before me on _____, **20** _____



Mission Team Application Process

Please select your Mission Team dates. Return all completed documentation to
Youth Frameworks, PO Box 2002, Henderson, TX 75653.

A \$500.00 deposit is required to reserve your place on the team.

Applicant Name: _____
Last First MI

Indicate the team dates you would prefer to join: _____

I understand that I am responsible for the following: (Please initial each line and return this form with all required documentation.)

_____ Application: Please complete and send. Please note the Applicant's Certification and Agreement must be notarized.

_____ Deposit: A deposit of \$500.00 (check or money order) is required with your application. Deposit is deducted from your team expense. This is only refundable if you are not accepted on the team.

_____ Pastor Letter of Recommendation: Please have your pastor complete and mail the Letter of Recommendation form.

_____ Photo: A recent photo is required.

_____ Participant Cost: Airfare, lodging, ground transportation and meals. Deposit is deducted from Participant Cost.

_____ Pocket Money: \$100 - \$150 spending money for souvenirs, etc.

X _____
Signature Date