

# *Application for Short-term Mission Trips*

## *Southwood Presbyterian Church Missions Department*

1000 Carl T. Jones Drive ♦ Huntsville, AL 35802 ♦ (256) 882-3085

To be considered for a short-term mission project through Southwood or receive financial assistance through Southwood's budget for another project, you must complete and submit this application to Southwood's Missions Department. This may involve a personal interview.

To be accepted, we must have your signed application, response from references and possible interview. After that you will be contacted about the acceptance of your application. Completion of an application does not constitute acceptance on a team but is the first step towards being included on a team.

### PERSONAL INFORMATION

Male  Female

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

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Numbers *Home*: \_\_\_\_\_ *Work*: \_\_\_\_\_ *Cell*: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Permanent Address (*if different*): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Marital Status: (*please check one*)

Single  Married  Widowed and Remarried  Annulled  Divorced  
 Engaged  Widowed  Separated  Divorced and Remarried

Spouse's Name: \_\_\_\_\_

Is your spouse supportive of you applying for this trip?  Yes  No

If no, please explain: \_\_\_\_\_

Names and ages (DOB) of children: \_\_\_\_\_

**PASSPORT INFORMATION**

*(if project is outside of U.S.)*

Do you have a passport?  Yes  No

If yes, list your passport number: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as found on passport: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

City/State/Country of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**EMERGENCY INFORMATION**

In case of an emergency while on the mission project, please notify:

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number *Home*: \_\_\_\_\_ *Work*: \_\_\_\_\_ *Cell*: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**HEALTH**

How would you describe your present health?

- Excellent  Good  Average  Poor

Please state any major illness(es) you have had in the last five years.

\_\_\_\_\_

Please list any medications you are currently taking.

\_\_\_\_\_

Please list any allergies you have. \_\_\_\_\_

Please list the name and phone number of your primary physician. \_\_\_\_\_

Are you presently under the care of a physician?  Yes  No

If yes, please explain. \_\_\_\_\_

**FIELD OF SERVICE**

Are you applying for one of Southwood's Teams?  Yes  No

If yes, which team? \_\_\_\_\_

If no, which organization will you be serving? \_\_\_\_\_

What are the dates of the project? \_\_\_\_\_

Field assignment (country) \_\_\_\_\_

Please describe the ministry you will have on the field.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you speak any foreign languages? \_\_\_\_\_

If yes, please indicate your level of proficiency. \_\_\_\_\_

\_\_\_\_\_

Please indicate any skills, talents or Christian service experience that you feel may be helpful on the field.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list previous missions experience:

Country	Church/Mission Organization	Dates of Project	Ministry
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

**FINANCIAL INFORMATION**

If you are going to be on a ministry trip other than a Southwood project, please provide us with the following information:

Total Amount you are required to raise/provide: \$\_\_\_\_\_

Breakdown of total cost:

Project Cost: \$\_\_\_\_\_

Travel Cost: \$\_\_\_\_\_

Medical Expenses: \$\_\_\_\_\_

Other: \$\_\_\_\_\_

Total support raised to date: \$\_\_\_\_\_

When is the date your support is due? \_\_\_\_\_

Please list the organization and address to where support should be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate how the support check should be designated/written:

\_\_\_\_\_

**CHURCH INVOLVEMENT**

Are you a member of Southwood Presbyterian Church?  Yes  No

If yes, how long? \_\_\_\_\_

If no, with which church are you a member and for how long?

\_\_\_\_\_

Are you currently part of a small group, discipleship group or Sunday School class?  Yes  No

If yes, who is the leader of the group/class? \_\_\_\_\_



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**EDUCATION/EMPLOYMENT**

Please list your education background from the most recent school attended, including high school if you have not completed a college degree:

Name/Location	Year Graduated	Major/Minor	Degree/Certificate
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Please list your employment and/or volunteer experience below beginning with the most recent.

Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_  
Title/Responsibilities: \_\_\_\_\_

Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_  
Title/Responsibilities: \_\_\_\_\_

**REFERENCES**

Please provide two references. One should be a ministry leader with whom you have served. The other reference should be someone (non family member) who knows your ministry abilities as well as your strengths and weaknesses.

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Telephone Numbers** *Home:* \_\_\_\_\_ *Work:* \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Numbers *Home*: \_\_\_\_\_ *Work*: \_\_\_\_\_

## COMMITMENT

### *Southwood Teams*

If selected to be a part of a Southwood Team, I make a commitment to:

- participate in team meetings/training prior to departure and after I return from the trip (unless providentially or geographically hindered).
- to conduct myself in a manner worthy of the Lord while serving Him on the project.
- submit to the team leaders and the host on-the-field authority.
- refrain from any behavior which may compromise my witness (i.e.: abusive language, drug use, etc.).

Additionally, if at any time while on the project my behavior constitutes a problem, the team leader has the authority to ask me to return home. Any additional costs incurred as a result of this action will be at my expense.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

### *Other Projects*

If I am going with a group other than Southwood, I make a commitment to:

- go through the training process the organization outlines for me.
- to conduct myself in a manner worthy of the Lord while serving Him on the project.
- submit to the team leaders, the host on-the-field authority, and the policies outlined by the agency.
- refrain from any behavior which may compromise my witness (i.e.: abusive language, drug use, etc.).

Sign: \_\_\_\_\_ Date: \_\_\_\_\_