

Missionary Application for Service

Unit 2126-SM, 3170 Airmans Dr., Ft Pierce, FL 34946

Name _____ Preferred name _____
First/Middle/Last

Male { } Female { } Social Security Number _____ - _____ - _____

Date of Birth _____ Place of Birth _____

Current marital status: Single Married Separated* / Divorced* / Remarried*

*Please explain _____

Name of spouse _____ Name of fiancé _____

Children's name(s) and age(s) _____

Present Address

_____ _____ _____ _____
Street or PO Box City State ZIP

Phone _____ E-mail _____

Address effective until this date _____

Permanent Address

_____ _____ _____ _____
Street or PO Box City State ZIP

Phone _____

Educational Information

School _____ Degree or hours _____

Major _____ Completion date _____

Church Information / Involvement

Home church _____ Denomination _____

Minister's name _____ E-mail _____

How long have you been attending this church? _____ How often? _____

Have you discussed your interest in Sonlight with the leadership of your home church? Yes { } No { }

Church response:

Answer the following questions

1. Have you been immersed in baptism? Yes { } No { } If so, when?
2. What do you believe about the Bible?
3. Who can be saved?
4. Have you had any experience discipling others? If so, please describe.
5. As a Christian, what training events have you attended and what leadership positions have you held?
6. What is your current involvement in evangelism? Specific training?
7. What do you believe is the form and function of baptism?

8. Give a brief statement of your understanding of God's plan of salvation.

9. What prompted your interest in working with Sonlight Ministries?

10. Have you ever lived abroad? Yes { } No { }

Country _____ Length of stay _____

Purpose _____

11. Describe any cross-cultural experiences (1 week or longer) that you have had.

12. How do you feel about learning a new language?

13. What is your current involvement in world missions or cross-cultural relationships?

14. Do you have any financial obligations or issues that would make it difficult for you to be involved in mission work?

15. Give a recent example of a conflict with an authority person and a peer. How did you deal with these conflicts?

16. Please evaluate the applicant in the following areas by placing a an (x) in the boxes below.

	Below Average		Average	Above Average		N/A
	1	2	3	4	5	
Servanthood						
Team Player						
Flexibility						
Response to Authority						
Teachability						
Consideration of others						
Emotional stability						
Common sense and good judgment						
Marital harmony (if married)						
Friendliness/openness to others						
Maturity						
Integrity						
Sense of humor						
Perserverance / consistency						
Adaptability / flexibility						
Self control						

17. What do you see as your strengths?

18. What do you see as your weaknesses?

19. What do you enjoy doing in your leisure time?

20. Please list your language proficiency skills:

Language _____ Proficiency level (basic, average, fluent, mother tongue)

Work Interest

- Career (full time/unknown length)
 Apprentice (1 year)
 Other _____

Desired departure date _____

Which of the following areas of ministry are you especially interested in? (check all that apply)

- teaching
 working with and training church leaders
 leading Sunday school classes and children's church
 leading Bible studies and prayer meetings
 maintenance and building work
 adult outreach (adult English and literacy classes)
 translation work

Emergency Information

Physical limitations, including allergies, depression, migraines, high blood pressure, substance abuse, prescribed medications, etc...

Have you had any traumatic experiences which have impacted your life? What impact would these experiences have on the mission field?

In case of emergency contact:

Name _____ Relationship _____

Address _____ City, State, Zip _____

Phone _____ E-mail _____

Has this person accepted your involvement in this program? Yes No

Passport # _____ Date of issue _____

How to Apply

Fill out and send this application and a clear photocopy of the picture page of your passport to:

Sonlight Academy PdP

Carmen Niehaus
Unit 2126-SM
3170 Airmans Drive
Ft. Pierce, FL 34946

Phone: 011-509-268-4834 E-mail: carmen@sonlightministries.org Website: www.sonlightministries.org

List your references below and give the proper reference form to each of those people. For their convenience, include a stamped envelope marked with the address listed above.

	Minister	Christian Leader	Peer
Name			
Phone			
E-mail			