

Volunteer Information Form

Personal Information (Name on Passport):

Name _____ Today's Date _____

Spouse's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Cell Phone: _____ Spouse's Cell: _____

Date of Birth _____ Social Security # _____

Passport # _____ Issue Date: _____ Expiration Date: _____

Passport Issued At: _____

 Male Female **Marital Status:** Single Married Widowed Divorced

Email: _____ Shirt size: _____

In case of emergency, please notify:

Name _____ Relationship _____

Address _____ City _____ Zip Code _____

Home Phone _____ Work Phone _____

Insurance Beneficiary (if different) _____

Relationship: _____

Volunteer Field Information:

With which mission journey will you serve? _____

Dates of journey _____ Location (Country) _____

Please list any foreign language training and your level of proficiency. _____

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

Please list any mission experience (local, US & overseas):

<u>Country</u>	<u>Mission Organization</u>	<u>Dates</u>	<u>Ministry</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Involvement: (Complete this section if you are an STF church member)

As a member of South Tampa Fellowship, your personal involvement and faithfulness is important. Furthermore, as a potential volunteer in missions, your faithfulness is even *more critical*. Before any candidate is placed on a mission team, the following three crucial requirements must be considered:

- Belief – Are you a born-again Christian? Yes No
- Tithing – Do you tithe your income? Yes No
- Attendance – Are you a faithful member of a Bible Fellowship/Small Group? Yes No
- Worship - Are you committed to faithful worship attendance? Yes No

How long have you been a member of South Tampa Fellowship? _____

Please list the ministries in which you have been involved at STF:

(Please include time of involvement and any leadership positions held). _____

Please list any ministries in which you have been involved outside of STF (please include time of involvement and any leadership positions held). _____

Health:

How would you describe your present health? Excellent Good Average

Please state any major illness you have had in the last five years. _____

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

If yes, please explain. _____

Please list any medications you are taking. _____

Please list any allergies you have. _____

References:

Please provide two references. Preferably one reference would be a pastor, teacher or volunteer leader where you serve or have served.

Name _____ **Relationship** _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Name _____ **Relationship** _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Testimony:

In the space provided below, please share your brief salvation testimony. Include how long you have been a believer. _____

Please explain briefly what you hope to see the Lord do in and through you on this mission journey.

Thank you ...The mission ministry thanks you for your interest and desire to serve our Lord as a volunteer in missions. You will be contacted personally about your application and the area in which a mission project is being planned.