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| **Istanbul Summer Outreach Application(Christ Community Church partnership with a Ministry of CRU International)***(One application per person)* |
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|  | ***PLEASE PRINT:***  Sex:   Male   Female     Mr.   Ms.   Mrs.   Pastor   Rev.   Dr.  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_          Last/Family              First/Given       M.I.City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  State:                      Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone Numbers:Home:(          ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Work:(          ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fax:(          ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell: (\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Marital Status:   Single   Married     Divorced    Widowed Spouse's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Emergency Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_Does your personal insurance cover you overseas?   Yes   No  Insurance Co. Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             Policy Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do you have a college degree?    Yes    No       Degree in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Describe your gifts and talents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do you play an instrument or sing? \_\_\_\_\_\_\_\_\_  Which one(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do you have any special concerns we should know about (medical, physical,  emotional, material)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Are you a U.S. citizen?  Yes  No  If no, which country? \_\_\_\_\_\_\_\_\_\_\_\_\_Do you have a Passport?  Yes      No        ApplyingFull name on Passport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Passport #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_                                  Month      Day      YearSocial Security Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Place of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Your passport must be valid for at least six (6) months after the estimated completion of the project.*Are you a Campus Crusade for Christ Staff Member?    Yes    No     Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Have you been on an international ministry project?    Yes    No If yes, what was the project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_When/where: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. Please write a brief summary describing how and when you became a Christian, what your current spiritual growth and involvement is, and how God's Word influences your daily life.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2. What is your church affiliation and current involvement (e.g., Bible studies you may lead or in which you participate, evangelism, one-to-one or group discipleship)?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3. What ministry activities have you had opportunity to be involved in (i.e. leading a Bible study, sharing your faith, discipling an individual etc.?)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4. What is your understanding of what you will be doing on the project? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**THE INFORMATION ON THE FOLLOWING TWO PAGES WILL BE KEPT IN STRICT CONFIDENCE.****Please answer questions 1-9 on a separate sheet of paper.**1. How (or from whom) did you learn of this trip?
2. How well do you deal with uncertainty and change? How well do you take instruction? Would you be willing to forego personal preferences to honor the culture of the country in which you are going?
3. Describe your cross-cultural living, training and/or travel experiences. What did you learn? What types of difficulties did you experience? Do you speak other languages? If so, how well?
4. Why do you want to participate in this trip? Please include any personal knowledge of and interest in our target people group.
5. Suppose you felt the leading of the Holy Spirit to take a direction or to act differently from what your team leader instructs. How would you handle this?
6. What particular skills do you have that could be useful on this mission trip?
7. We do the best we can to create a team that would function best in the mission field. If necessary, would you consider being an alternate for this trip? That is, would you be willing to be called to go on this trip at a later date if you are needed? [ ]  Yes [ ]  No
8. Ministry Experience:
	1. Can you briefly share your testimony with another person? [ ]  Yes [ ]  No
	2. Can you effectively share your faith? [ ]  Yes [ ]  No
	3. Do you feel comfortable praying in public? [ ]  Yes [ ]  No
9. In the last 12 months, have you used narcotics, hallucinogens or drugs not prescribed by a physician?

[ ]  Yes [ ]  No1. I have read and agree with the Statement of Faith. (see last page)

(SIGNATURE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_1. Do you anticipate that you will be raising financial support for this trip? [ ]  Yes [ ]  No [ ]  Unsure

Christ Community attendees automatically qualify for assistance toward the cost of the trip. However, we ask that all short term missionaries seek to help reach their team’s total funding goal. (Note: If you are not a regular attender at Christ Community Church, you are not eligible for scholarship funds for this trip from Christ Community. You are, however, able to join the team in raising support and applying the funds you raise to your trip costs. We ask that you submit a check to Christ Community for the remainder of your personal travel costs for the trip. We will, most likely, purchase your airfare ticket before you know a final total but we do expect payment for the remaining costs before departure.)I understand that once airline tickets are purchased, if I choose not to go on the trip for any reason other than an emergency, I am responsible for reimbursing the church for the cost of the ticket. (SIGNATURE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**MEDICAL QUESTIONNAIRE**(PLEASE READ CAREFULLY)We do our best to make these trips as comfortable as possible. However, our trips may be extremely strenuous and stressful. They may include long train or bus rides of over 10 hours in duration. Travelers are almost always required to carry their own luggage. Rest rooms are not always readily accessible. The food can be high in fat, carbohydrate and sodium content. Fruits and vegetables may not be available. The housing and meeting rooms may not have air conditioning or adequate heating. There can be a considerable amount of walking between locations in addition to climbing many flights of stairs. During the winter months, walking may be on snow-covered or ice-covered walkways and stairs. Conditions in much of the world can be very hot and this might affect your overall strength and energy. The air quality is poor in some locations. Each trip varies. Please speak with the team leader if you have any concerns about your suitability for a particular trip. *Any of these factors could aggravate certain health conditions, and the medical facilities in many countries where we travel are limited. We reserve the right to request a medical release statement from your physician.*1. Do you have any existing medical condition(s) that may require extended medical treatment or surgery in the future? 2. Have you had any surgery or major health problems in the past 2 years? If so, please explain.3. To your knowledge, do you have difficulty adapting to altitudes? If so, please explain.4. Have you ever experienced any psychological or emotional conditions that could impair your role on this trip? (If yes, please explain and indicate if you are currently being treated by a physician) [ ]  I would prefer a phone call to discuss this answer.**If you did not list any conditions in questions 1-4, please skip to question 6.**5. In your opinion, would any of the conditions listed above limit your ability to perform the ministry for which you have applied? [ ]  Yes [ ]  No Have you discussed this trip with your physician? [ ]  Yes [ ]  No6. Are you currently taking or do you regularly take any medications? If so, please list the drug name(s), what each drug treats, and note which are prescription and non-prescription.7. Do you have any special dietary needs? If so, please explain.8. Do you snore or have any sleep disorders? (This is to help us determine your room assignment and will be kept confidential. If you are not able to have a roommate due to your snoring, you may be required to pay extra for a private room if needed.)9. Please briefly summarize your health. Do you place any limits on yourself to avoid physical or medical problems? (Any hearing, vision, mobility limitations?**Statement of Faith****God**1. We believe in one God, Creator of all things, holy, infinitely perfect, and eternally existing in a loving unity of three equally divine Persons: the Father, the Son and the Holy Spirit. Having limitless knowledge and sovereign power, God has graciously purposed from eternity to redeem a people for Himself and to make all things new for His own glory. **The Bible**2. We believe that God has spoken in the Scriptures, both Old and New Testaments, through the words of human authors. As the verbally inspired Word of God, the Bible is without error in the original writings, the complete revelation of His will for salvation, and the ultimate authority by which every realm of human knowledge and endeavor should be judged. Therefore, it is to be believed in all that it teaches, obeyed in all that it requires, and trusted in all that it promises. **The Human Condition**3. We believe that God created Adam and Eve in His image, but they sinned when tempted by Satan. In union with Adam, human beings are sinners by nature and by choice, alienated from God, and under His wrath. Only through God’s saving work in Jesus Christ can we be rescued, reconciled and renewed. **Jesus Christ**4. We believe that Jesus Christ is God incarnate, fully God and fully man, one Person in two natures. Jesus-Israel’s promised Messiah-was conceived through the Holy Spirit and born of the virgin Mary. He lived a sinless life, was crucified under Pontius Pilate, arose bodily from the dead, ascended into heaven and sits at the right hand of God the Father as our High Priest and Advocate. **The Work of Christ**5. We believe that Jesus Christ, as our representative and substitute, shed His blood on the cross as the perfect, all-sufficient sacrifice for our sins. His atoning death and victorious resurrection constitute the only ground for salvation. **The Holy Spirit**6. We believe that the Holy Spirit, in all that He does, glorifies the Lord Jesus Christ. He convicts the world of its guilt. He regenerates sinners, and in Him they are baptized into union with Christ and adopted as heirs in the family of God. He also indwells, illuminates, guides, equips and empowers believers for Christ-like living and service. **Please return this application by February 15 with a non-refundable $100 deposit** and a photocopy of the picture page of your passport. **Make checks payable to Christ Community Church of Ames. Submit to the Adult Ministries Administrator at the CCC office.** |  |