

GRACE & PEACE MINISTRY FELLOWSHIP

MISSIONARY APPLICATION TO THE DOMINICAN REPUBLIC

This application is to provide adequate information to the ministry so that decisions for service can be prayerfully and practically considered. All provided information is considered to be accurate for the application process and all applicants are required to affix an original signature on the signature page to attest to information authenticity. You may submit the application by email but the signature page (Page 6 only) must be printed, signed with an original signature and mailed immediately to the address provided. The applicant is encouraged to keep a copy of the application for personal reference.

(Please type or print the answer to all of the following questions.)

Date of Application M _____ D _____ Y _____

General Information:

First Name: _____ Last Name: _____

Date of Birth: M/D/Y _____ Sex: M or F _____

Telephone Numbers:

Home# (____) _____ Work# (____) _____

Fax# (____) _____ E-Mail: _____

(Please insert your address as it would appear on a mailing label for your country.)

Current Address: _____ Permanent Address: _____

Emergency Contact:

Name: _____

Address: _____

Phone: (____) _____ Relationship to you: _____

Family Information:

Status: __Single __Engaged __Married __Remarried __Divorced __Separated __Widowed

Spouse's Name: _____

Names and ages of your children:

Passport Information

Name on passport: _____ Country of Citizenship: _____

City and/or Country where Passport was issued: _____

Passport number: _____ Date of issue: D/M/Y _____

Expiration Date: D/M/Y _____

Health Insurance Numbers & Physican Information

Health Insurance Company: _____

Health Insurance ID or Group #: _____

Family Physician _____

Phone No. _____

Spiritual Growth

- Testify of your conversion experience and your spiritual journey since that experience.

- Describe one or more character issues that God has dealt with in your life and the lessons you have learned from these experiences.

- Comment on your devotional life. Are you meeting your expectations for personal spiritual growth?

- How does your family feel about your intentions to enroll in the Internship?

Leadership and Church Experience

- This is an advanced leadership development internship. Please briefly describe the experiences, internships or trainings you been involved in that have contributed to your growth in leadership.

- List any previous leadership/ministry experience. Describe your roles, responsibilities, etc.

- Please describe your relationship with your local church or primary ministry affiliation.

- How serious do others in leadership take your leadership and the pursuit of what you feel called to?

Have you experienced miracles in your life? Please describe some of these experiences.

- What kind of platform ministry experience do you have? (Examples: preaching/teaching, dance, prophecy, singing, worship, and drama).

- When you are ministering, do you work better alone, with a team, or under a leader/leaders?

Gifts and Strengths

- What languages do you speak and how proficiently?

- What skills, natural talents and special abilities do you possess?

- What do you think your spiritual gifts are? Do you have the opportunity to exercise these gifts in your local church body or ministry?

Goals and Expectations

- Comment briefly on the circumstances that led up to your decision to apply for this internship.

- Why are you interested in this internship? Please describe what spiritual and ministry goals you hope to fulfill through this internship.

- Briefly comment on your plans following the internship?

Missions Experience

- Have you ever been on a mission trip? Please tell us where, when, with whom, your role, the trip's nature and length.

- Is there a particular people group or area of interest that you feel called to? (China, orphans, widows, pastors, trafficking/prostitution, AIDS victims, etc.) explain

- How do you see missions being a part of your life in the future?

- Do you have any practical skills that will be of use in the mission field? (nursing, dietician, mechanics, teacher, sewing, business, etc.) If so, please include your level of proficiency in these areas.

Working with Children

- Have you ever worked with children? Please explain in the capacity and time period.

- Do you feel comfortable ministering to children? If yes, in what capacity? (one on one, small groups, large groups, serious settings, play settings, etc.)

We realize that the following questions are personal. Please be assured that all answers are held in strict confidentiality. Provide as much information as you feel necessary.

Personal Experiences

- Do you use or have you used illegal or addicting drugs? Please explain.

- Do you use tobacco in any form? Please explain.

- Do you drink alcoholic beverages? Please explain.

- Have you been involved in any of the following? If so, please circle the number(s) and explain such things as the circumstances, length of period, extent of involvement and the deliverance process you experienced:
 1. The occult
 2. Cult or sect participation
 3. Homosexuality
 4. Pornography

- Have you been the victim or perpetrator of verbal, physical or sexual abuse? When and what is or was the method of resolution and restoration?

- Have you ever been convicted of a felony? What was the nature of the crime and the resolution?

Personal Essay

Please provide a short paragraph explaining why you want to participate in a Grace & Peace Ministry Fellowship internship.

References

Your references should include a **Spiritual Overseer**, a **Professional or Employer** who can attest to specific supervisory or relationship involvement and a **Personal** reference of your choosing that is not a member of your immediate or extended family.

Name	Position	Address	Telephone & E-mail
	Spiritual Overseer		
	Professional/ Employer		
	Personal		

SIGNATURE ACKNOWLEDGEMENT PAGE

Applicant Signature & Acknowledgement

I certify that all of the statements and information included in this application made by me are true, complete and correct to the best of my knowledge and belief, and that they are made in good faith. I understand that any misrepresentation of information shall be sufficient cause for rejecting my candidacy.

I realize that Grace and Peace Ministry Fellowship intends to take reasonable precautions against accidents; nevertheless, I agree to release and hold harmless Grace and Peace Ministry, its staff, agents and officers, with respect to any injuries, claims, damages or demands which may arise out of any accident which might occur during this Grace and Peace Ministry Internship or other incidents which may occur during this internship. This release includes damage, destruction, theft or loss of the personal belongings. Further, I agree that I shall make restitution for any damages resulting from my negligent conduct.

I give permission to the Grace and Peace Ministry Fellowship assigned leaders and any health-care provider receiving referral to render emergency medical care and treatment to while participating in this Grace and Peace Ministry Fellowship internship. My insurance information has been provided in the application. Medical records and consultation can be provided by my family physician.

I hereby authorize any and all of my identified references in this application to release any records, and to respond fully and completely to all questions that officials of Grace and Peace Ministry Fellowship may ask regarding my application. I will hold all my references harmless of any and all claims that I might otherwise have against them with regard to statements made relative to this application. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and I release from liability all persons and/or entities supplying information regarding my background. However, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by Grace and Peace Ministry Fellowship or by my listed references.

Signature of Candidate (in ink)
(must be original)

_____ Date _____

Application Processing Directions

You must send this application as an attachment to: gracepeacemissn@aol.com

All originals of the completed G&PMF application forms as well as the signature page should be mailed to the address below.

The applicant is encouraged to retain a photocopy as a personal resource.

Applications may be followed up by email and/or a phone or personal interview. Applicants will be notified regarding acceptance as soon as review is complete.

MAILING ADDRESS:

Grace and Peace Missionary Fellowship
2055 Pleasant Valley Road
Niles, Ohio 44446

Applicant do not write below this line

Office Use Only:

Reviewed by _____ Date _____

Phone Interview by _____ Date _____

Reference Responses Attached _____

Application Notes

Approved _____ Not Approved _____

Officer _____ Date _____

Dates of Assigned Service _____

Notification Sent by _____ Date _____