

**Faith Fellowship Student Missions Application
Italy –2024**

PERSONAL INFORMATION

Name (as it appears on Birth certificate/passport)

Last _____

First _____

Middle _____

Address _____

City _____

Zip _____

Phone -Home _____

Phone -Work _____

Phone -Cell _____

Date of Birth _____

E-Mail _____

Gender Male ☐ Female ☐

Passport # _____ Expiration Date _____

T-Shirt Size Sm ☐ Med ☐ Lg ☐ XL ☐

Father

Last _____

First _____

Phone _____

E-Mail _____

Mother

Last _____

First _____

Phone _____

E-Mail _____

If parents are separated or divorced, who has legal custody? Father ☐ Mother ☐ Joint ☐

LIFE INFORMATION

Tell us about your relationship with your family _____

What is your past and present involvement with Faith Fellowship church? _____

Why are you interested in participating in this mission journey? _____

What are your expectations for this experience? _____

If you have served on any other mission journeys, briefly describe your involvement, where you served, and the impact on your life. _____

List three strengths you bring to this team (be specific) _____

Can you list three weaknesses or concerns you bring to this team? (be specific) _____

Your life story and how your relationship with Jesus has affected your life is very important. They are gifts that God uses to reach others with His grace and love. Please share either your salvation story, or a recent work of the Lord in your life (Please use more paper if needed). _____

Flexibility is a primary pre-requisite for such a journey as this. Do you feel you possess this attribute?
Yes ☐ No ☐

Team preparation, team building, team prayer, and purposeful debrief are also essential elements to a successful mission journey. Do you agree to participate in all scheduled events to the best of your ability?
Yes ☐ No ☐

What languages do you speak fluently? _____

HEALTH INFORMATION

Is your general health excellent, good, or poor? _____

Do you have allergies? (If yes, please explain) Yes ☐ No ☐

Do you have dietary restrictions? (If yes, please explain) Yes ☐ No ☐

Do you have any physical challenges? (If yes, please explain) Yes ☐ No ☐

Do you have any emotional challenges? (If yes, please explain) Yes ☐ No ☐

REFERENCES

Please give us the information for two of your friends who can attest to your Christian lifestyle at school. (not related)

Name _____ # of months they have know you _____
Phone _____ E-Mail _____

Name _____ # of months they have know you _____
Phone _____ E-Mail _____

Please give us the information for two people who would give a recommendation for your participation on this journey based on your spiritual and physical health. (These people must be at least 18 years of age and not related to you.)

Name _____ Position/Title _____
Relation to you _____ # of months they have know you _____
Phone _____ E-Mail _____

Name _____ Position/Title _____
Relation to you _____ # of months they have know you _____
Phone _____ E-Mail _____

Parents, please write any comments you have _____

CONTACT INFORMATION

Please provide emergency contact information.

Name _____
Relation to you _____
Phone –Home _____
Phone –Cell _____
E-Mail Address _____

Name _____
Relation to you _____
Phone –Home _____
Phone –Cell _____
E-Mail Address _____

INSURANCE INFORMATION

Please provide a copy of your insurance card in this area, both front and back.

RISKS

I understand that any mission trip/journey includes an inherent level of explicit and implicit risk. Travel accidents, sickness and injuries are among these risks. Further I will review information about the country I will be traveling to, found on the Consular Sheets produced by the U.S. State Department at their web site.

Initial_____

FINANCIAL RESPONSIBILITIES

I acknowledge the Lord is the provider of my every need, and He is a rewarder of those who diligently seek Him. Along with this confidence I agree to be responsible for all the fees associated with my mission journey, either through personal funding, mission team fundraising or building a financial support team

Initial_____

STATEMENT OF FAITH

We believe in the Bible as our foundation and final authority for personal faith and conduct. From God's Word comes our belief in the basic doctrines and creeds of the Christian faith:

The Trinity,
The virgin birth,
The deity of Christ,
The personality of the Holy Spirit,
The divine inspiration of Scripture,
The suffering death of Christ
as atonement for the sins of the world,
His resurrection and ascension into heaven,
His return to judge the world,
The existence of heaven and hell.

In these matters we are very traditional and evangelical. We are also a church which believes that the gifts of the Spirit referred to in 1 Corinthians 12 are still in operation today, and we encourage their use when appropriate and in due respect to authority. We stress the fruit of the Spirit for holiness of life and character for all participants.

I have read and agree with the Faith Fellowship Statement of Faith.

Initial_____

AUTHORIZATION

I have read and understood the above information. The information I have given is accurate and true to the best of my knowledge.

Applicant's Signature _____ Date _____

Parent Signature _____ Date _____

(Required if applicant is under the age of 18)

This information is confidential and will not be shared outside of the leadership team