



PO Box 323, Elizabethtown PA 17022
 717-546-0208 www.FIAintl.org



Please attach/upload
 a recent photo

Short-Term/Team Application

We are excited about your interest in joining with Friends in Action International! This application is designed to help us get acquainted with you. Please type or print clearly in black ink. Once we have received your completed application, we will get back in contact with you. If you object to answering any questions on the application, please indicate as such, stating your reasons.

CONFIDENTIAL

Name _____
 Title (Mr/ Mrs / Miss/ Ms/ Dr/ Rev) First Middle Last Maiden

Spouse's Name _____
 Title (Mr/ Mrs / Miss/ Ms/ Dr/ Rev) First Middle Last Maiden

Present Address _____
 City _____ State _____ Zip _____ Phone (_____) _____

Email _____ School Work Personal
 Birthdate ____/____/____

Passport name (full name as listed) and number _____

****Please send in a color copy of your passport with your application.**

Gender: Male Female
 Marital Status: Single Married

Which airport you would prefer to fly out of? _____

How long does it take you to get there? _____

How did you hear about Friends in Action?

- FIA website
- FIA missionary (Name) _____
- FIA representative (Name) _____
- Other (Name) _____

CHRISTIAN EXPERIENCE

At what age were you saved? _____

How do you know that you are a Christian? _____

Other information that would help us become better acquainted with you, such as hobbies, special interests, resources and experiences:

It is the policy of FRIENDS IN ACTION International to abstain from smoking and drinking alcohol during any mission service or ministry opportunity. For short-term trips, this includes from when the team first meets at the airport until the end of the trip when team members go their separate ways.

Will you have you have any difficulty in agreeing to this? Yes No

CHURCH RELATIONSHIP

To which church do you belong? _____ How long? _____

GIFTS & SERVICE

Describe your spiritual gifts, abilities, and opportunities where you have served.

Do you have any overseas experience? Yes No

Explain: _____

Have you considered serving in missions fulltime or part-time? Yes No

EDUCATION & TRAINING

Educational background: High School Trade School College Graduate Post-Graduate

Please list your trade, your major or other training _____

Your profession: _____

List any professional credentials you hold and with whom (certification, licensing, ordination):

DOCTRINAL STATEMENT

We believe:

1. In the word-by-word inspiration, inerrancy, and final authority of the Holy Scriptures.
2. In one God, eternally existing in three persons: Father, Son and Holy Spirit.
3. In the Lord Jesus Christ as true God and true man; His virgin birth, sinless humanity, substitutionary death, bodily resurrection, present advocacy, and His bodily return.
4. In the fall of man, resulting in his complete and universal separation from God and his need of salvation.
5. That the Lord Jesus Christ shed His blood and died as a sacrifice for the sins of every person in the whole world.
6. That salvation is a free and everlasting gift of God, entirely apart from works, received by personal faith in the Lord Jesus Christ.
7. That the Holy Spirit regenerates with divine life and personally indwells the believer upon faith in Christ for salvation.
8. In the bodily resurrection and unending life of the saved with the Lord and the bodily resurrection and unending punishment of the unsaved.
9. The church, beginning at Pentecost, is the body of Christ comprised of those who have trusted Jesus Christ as Savior.
10. It is the church's responsibility to glorify Christ by preaching the gospel to the world and making disciples of all nations.

Any person who is sound in the faith and in all fundamental truths, will be accepted irrespective of race, color, or national or ethnic origin.

Have you read our doctrinal statement? Yes No

Have you reviewed these websites: <http://travel.state.gov> and <http://www.cdc.gov/travel> for your trip country?

YES NO

EMERGENCY CONTACTS & HEALTH PROFILE

Name _____ Phone _____
 Birthdate _____ Height _____ Weight _____ Sex _____ Blood Type _____

In case of emergency, please notify: _____

Relationship _____ Phone _____
 Address _____
 Doctor's Name _____
 Office Phone _____ Emergency Phone _____

Current Medications _____

Medical History

Do you have or have you had any of the following conditions?

	Have/Had		Have/Had		Have/Had		Have/Had
Asthma	___/___	Epilepsy	___/___	High Blood Pressure	___/___	Pain in Joints	___/___
Back Problems	___/___	Fainting Spells	___/___	Kidney Problems	___/___	Rheumatic Fever	___/___
Cancer	___/___	Gallbladder	___/___	Malaria	___/___	Shortness of Breath	___/___
Diabetes	___/___	Heart Disease	___/___	Neuritis	___/___	Thyroid	___/___
Dizzy Spells	___/___	Hernia	___/___	Pain in Chest	___/___	Tuberculosis	___/___
						Veneral Disease	___/___

Do you have allergies to: Penicillin _____ Serum _____ Sulfonamides _____ Foods (specify) _____
 Bee sting _____ Other _____ Please specify _____

Date of last Tetanus Immunization: _____

Please list any recent surgery, serious illness or hospitalization: _____

Are you currently receiving medical treatment or are under medical observation? Yes No

Have you had any exposure to Hepatitis B, HIV/AIDS or any such disease? Yes No

Do you have any convictions against taking preventive medicines, such as anti-malarial, etc.? Yes No

Do you have any other limitations or other significant health conditions which might affect your missionary service which you think FIA should know about? Yes No

Have you ever been treated for, or are you now suffering from emotional difficulties? (such as depression, anxiety phobias, etc.) Yes No

Please explain any of the above, using a separate sheet of paper if necessary. _____

I affirm that the information above is true and complete to the best of my knowledge, and I hereby release Friends in Action International and all persons associated with this organization in the US and abroad from any liability for health impairment or bodily injury as the result of pre-existing health conditions. I, myself, will be responsible while on a Friends in Action project for monitoring and managing all aspects of any pre-existing condition.

Signed _____ Date _____
 (Parent Signature if under 18 years of age) _____ Date _____

SKILLS PROFILE

Name: _____

Please help us know better how to utilize your skills and abilities.

INTERESTS SKILLS EXPERIENCE

Indicate Level of Skill With Number

1- Hobby 2- Limited Experience 3- Moderate Experience 4- Occupation 5- Professional

<p><u>Languages</u></p> <p>_____ Spanish</p> <p>_____ French</p> <p>_____ TESL</p> <p>_____ Other: _____</p> <p><u>Agriculture</u></p> <p>_____ Animal Husbandry</p> <p>_____ Ag. Science</p> <p>_____ Farming</p> <p>_____ Landscaping</p> <p><u>Aviation</u></p> <p>_____ Avionics</p> <p>_____ Fuels Mechanic</p> <p>_____ Pilot</p> <p><u>Computer</u></p> <p>_____ Consulting</p> <p>_____ Repair</p> <p>_____ Database Mgmt.</p> <p>_____ Programming</p> <p>_____ Web Development</p> <p><u>Construction/Trades</u></p> <p>_____ Cabinet Maker</p> <p>_____ Carpenter</p> <p>_____ Cement</p> <p>_____ Laborer</p> <p>_____ Drywall</p> <p>_____ Electrical</p> <p>_____ Framing</p> <p>_____ HVAC</p> <p>_____ Masonry</p> <p>_____ Metalwork</p> <p>_____ Painting</p> <p>_____ Plumbing</p> <p>_____ Project Manager</p> <p>_____ Welding</p> <p><u>Development</u></p> <p>_____ Community Development</p> <p>_____ Donor Development</p> <p>_____ Estate Planning</p> <p>_____ Event Coordination</p> <p>_____ Fund Raising</p>	<p><u>Electronics/Radio</u></p> <p>_____ Electronics</p> <p>_____ Radio/Ham Broadcast</p> <p>_____ Radio Tower Maintenance</p> <p>_____ Microwave/Satellite Dish</p> <p><u>Engineering</u></p> <p>_____ Architect</p> <p>_____ Civil</p> <p>_____ Chemical</p> <p>_____ Electrical</p> <p>_____ Mechanical</p> <p>_____ Project</p> <p>_____ Radio</p> <p>_____ Surveying</p> <p><u>Facilities</u></p> <p>_____ Custodial</p> <p>_____ Ground Maintenance</p> <p>_____ Handyman - General</p> <p>_____ Appliance Repair</p> <p>_____ Shipping Container</p> <p>_____ Warehouse Work</p> <p><u>Graphics/Media</u></p> <p>_____ AV/Film</p> <p>_____ Desktop Publishing</p> <p>_____ Journalism</p> <p>_____ Graphic Design</p> <p>_____ Photography</p> <p>_____ Printing</p> <p>_____ Web Design</p> <p><u>Heavy Equipment</u></p> <p>_____ Backhoe</p> <p>_____ Bulldozer/Earth Moving</p> <p>_____ Logging Equipment</p> <p>_____ Sawmill</p> <p>_____ Skid-steer</p> <p>_____ Well Drilling</p> <p><u>Hospitality</u></p> <p>_____ Hostess/Open Home</p> <p>_____ Baking/Cooking</p> <p>_____ Food Services</p>	<p><u>Ministry</u></p> <p>_____ Adult's Ministry</p> <p>_____ Children's Ministry</p> <p>_____ Music Ministry</p> <p><u>Mechanics/Drivers</u></p> <p>_____ Auto Body</p> <p>_____ Auto Mechanic</p> <p>_____ Tractor Engines</p> <p>_____ Truck Driver</p> <p>_____ Truck Mechanic</p> <p><u>Office</u></p> <p>_____ Administrative Assistant</p> <p>_____ Accounting</p> <p>_____ Bookkeeping</p> <p>_____ Bulk Mailing</p> <p><u>Professionals</u></p> <p>_____ Dentistry</p> <p>_____ Doctor</p> <p>_____ EMT</p> <p>_____ Nursing</p> <p>_____ Teacher</p> <p><u>Science</u></p> <p>_____ Chemist</p> <p>_____ Geologist</p> <p><u>Other Interests & Skills:</u> <u>Further explanation on selected skills</u></p>
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RESPONSIBILITY WAIVER

I am aware that all positions are voluntary, without financial remuneration. I agree to abide by all present and subsequent issued rules of Friends in Action. I clearly understand that raising all expenses will be my responsibility. I further agree that FIA has the right to discontinue my ministry through FIA at any time at its sole discretion. **Due to IRS rules, I understand that any funds raised by my donors and received by FIA above and beyond the amount needed for my trip will be put toward the total expenses of the team, the project, or the country where I will be serving. No funds will be returned.** In the same manner, if an incident or incidents occur at any point of the trip in which additional funds will be needed, I understand that I will be liable to pay those additional costs.

I recognize that participation on a trip of this nature may be hazardous or dangerous. Therefore, I am, for myself, my heirs, executor and/or administrator, releasing and forever discharging FIA and all its officers, agents, servants, and employees, acting officially or otherwise, from any and all reason of injury, damage (including property damage to any of my belongings), loss or death which may occur from any cause including, but not limited to, any accident and/or occurrence while participating individually or with others while on this missions trip or after the trip due to complications of any illness or accident.

Signature _____ Date _____

Signature of Parent/Guardian (if under 18) _____ Date _____

PHOTO RELEASE AND NEWLETTER

I, _____, hereby grant and authorize Friends in Action International the right to take, edit, alter, copy, exhibit, publish, distribute and make sue of any and all pictures or video taken of me to be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, annual reports, websites, social networking sites and other printed and digital communications, without payment or any other consideration. This authorization extends to all languages, media, formats and markets now known or hereafter devised. This authorization shall continue indefinitely, unless I otherwise revoke said authorization in writing.

Upon completion of this application, you will electronically receive the Friends in Action International newsletters. To receive a paper copy of the FIA newsletter or to opt out of receiving future newsletters please put your request in an email to FIA-USA@faintl.org

Signature _____ Date _____

Signature of Parent/Guardian (if under 18) _____ Date _____

DISCLOSURE & RELEASE

As unstable situations in our world arise, we feel the need to disclose to you the responsibilities Friends in Action (FIA) will assume and the liabilities from which we must have your release. FIA will provide the team member with the U.S. State Department information and Centers for Disease Control and Prevention information on the country of travel.

While in a foreign country, we cannot guarantee safety of persons or property, but the leadership of FIA will stay informed and advise the team members of security and safety considerations. We do not pay ransom and cannot be held responsible for any damage or loss during the trip. We also may not be held accountable for any terrorist situation that may occur.

The undersigned has read all travel and medical advisories and therefore is informed and aware of the risks of international travel, and holds Friends in Action board and staff free from all liability while participating on the following short-term work project:

Country _____ For these dates _____

Signature _____ Date _____



TEAM COVENANT

We desire to be a team characterized by Christ-like behavior exhibited through unconditional love, unselfish service and unified teamwork. We realize the following elements are crucial to the effectiveness, quality and safety of our trip together. As members of this Short-Term Missions Team, we agree to:

1. Respect the project leader and his decisions. In the event he should be unable to carry out his responsibilities, we will recognize the authority of the person that is designated to function in his absence.
2. Refrain from gossip. Instead, we will affirm and encourage each other regularly.
3. In the event of intra-team conflicts, follow the Biblical guidelines (Matt. 18:10-20) of loving confrontation. This would involve, first of all, prayer, then personal confrontation; and if the situation cannot be resolved, consultation with the project leader. His wisdom will dictate the involvement of a missionary or national, if such a situation arises.
4. Adopt a spirit of forgiveness, recognizing sin as our common enemy and human failings as our common experience. Thus, we will not allow a spirit of bitterness to fester.
5. Allow the development of personal accountability friendship (two people) while, at the same time, being careful not to be exclusive in our relationships.
6. Observe our personal and team devotional times.
7. Refrain from complaining, recognizing travel and conditions in the country we're working in will present different and unexpected circumstances. Instead, we will be creative and supportive.
8. Remember that we are primarily ambassadors of Jesus Christ, and also representatives of Friends in Action. We will try to abide by the cultural expectations of the people group that we are living among, being careful not to be offensive in any way.
9. Refrain from any activity that could be construed as romantic interest toward a national. Certain activities that are normal in our culture may be inappropriate in others.
10. Remember to maintain a servant attitude toward the nationals, missionaries and teammates. We have come to learn, not to teach. Unless asked, we will resist the temptation to inform our hosts about "how we do things" when procedures seem to be inefficient and attitudes close-minded.
11. Work hard, attempting to complete the project; while, at the same time, recognizing the values of the host culture: People are more important than time and relationships are more important than job productivity. We will, therefore, attempt to exhibit patience and flexibility.
12. Respect our host's view of Christianity. We recognize that Christianity has many faces throughout the world and that our purpose of this trip is to witness and experience faith in action in the lives of others.

I, _____, as a member of this team, commit myself to abide by this covenant to the best of my God-given ability.

Signed _____ Date _____

Destination Country _____ Trip Date _____

REFERENCES

List three people, not a part of your family, who know you well and are willing to fill out the Reference Questionnaire. Three reference forms are enclosed. List here who you've handed them out to:

A. Pastor or full-time staff member at your church (if not presently attending a church an alternate reference will be accepted)

Name _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

B.

Name _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

C.

Name _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

YOUR SIGNATURE BELOW INDICATES THE FOLLOWING:

- All the information I have provided is true to the best of my knowledge.
- I have read Friends in Action International's doctrinal statement and agree to respect it in all regards. I will not propagate convictions contrary to those in the statement during my time with FIA.
- I am willing to faithfully carry out my assignment and to cooperate in every way possible. I will accept and respect the decisions and authority of the mission leaders and abide by the rules of the mission. If I have a cause for complaint or a difference of opinion, I will bring it at once to the mission leadership instead of to others who may not be able to help me.
- I will not hold FIA liable for injury, disease, or delay of return while under the auspices of FIA.
- I will provide a police clearance record upon request from FIA.

Applicant's Signature _____ **Date** _____

PLEASE RETURN APPLICATION FORMS TO:

Friends in Action International, Attention: Short-term Teams, PO Box 323, Elizabethtown PA 17022 USA

Email: fia-usa@fiainl.org

Or, if you're from Canada, you can mail to:

Friends in Action—Canada, PO Box 901, Guelph ON N1E 6M6 CANADA

Email: office.fiac@gmail.com

****Don't forget to include a color copy of your passport.**

NOTE: Your passport must be valid for at least six months after the end of your trip.

Confidential Reference Questionnaire

_____ has applied to Friends in Action International with regard to joining us in missionary service in _____. Since most of these applicants are complete strangers to us, would you prayerfully ask the Holy Spirit to lead you in answering these questions? Any information given by you will be kept in strictest confidence.

How well do you know the applicant?

- Very well Limited knowledge Not very well

In what capacity do you know the applicant?

Describe the applicant's strengths.

Describe the applicant's weaknesses.

Does applicant have special ability in: Music? Art? Speech? Athletics?

Does applicant have special ability in physical work?

- Carpentry? Masonry? Secretarial? Other? _____

If the applicant is married how would you evaluate his/her marriage relationship?

- Superficial Detached Reserved Warm, growing Good communication
 Don't know

Please place an X in the box that appropriately reflects your answer, as well as any necessary comments.

5-Outstanding 4-Above Average 3-Average 2-Below Average 1-Unsatisfactory 0-Not Known

5 4 3 2 1 0

Comments

Clear evidence of faith in Jesus Christ as Lord and Savior							
Spiritually mature and able to use and apply God's Word							
Evidence of experience in evangelism and Christian service							
Education or training appropriate for the specific ministry in which he/she will be engaged							
Appropriate job skills and work experience							
Good physical health							
Evidence of moderation and sensitivity to local standards in the areas of dress, grooming and personal habits							
Emotionally healthy and mature, able to adjust to change, able to cope, handle stress, overcome hardships, resilient							
Evidence of healthy, maturing relationships with family, friends, colleagues and church members							
Works well with others/team player							
Resourceful, able to generate financial support							
Integrity							
Drive/Initiative							
Communication skills							
Creative/Risk taker							
Flexible/Adaptable							
Ethical							
Optimistic							
Overall impression and recommendation							



Would you recommend him/her for this position? Yes No

Why or why not?

Please add any significant information or impressions brought to mind by the questions on this form.

Thank you for taking the time to fill out this questionnaire. Your information will serve to assist us in making a decision concerning this applicant's possible missionary service.

Date: _____

Your signature _____

Name (please print) _____

Address _____ City _____

State _____ Zip _____ Email: _____

Telephone: Home (____) _____ Work (____) _____

May we call you if we have any questions? Yes No

Please return this form to:

Personnel Department
Friends in Action International
PO Box 323
Elizabethtown, PA 17022 USA

Marked: **CONFIDENTIAL**

Or email to: BettyNissley@fiintl.org