



PHOTO
REQUIRED

GLOBAL MISSION APPLICATION FORM

SHORT TERM MISSION TRIP

YOUR DETAILS

Full Name	
Address	
Telephone Number HOME	
Telephone Number MOBILE	
Email	
Date of Birth	
Marital Status	
Occupation	
Member of Trinity Cheltenham	Yes/No
Life Group Leader	
If you are a member of another church please give information	

PASSPORT DETAILS

Nationality	
Passport Number	
Place of Issue	
Date of Issue	
Expiry Date (Important: You will need at least 6 months left on your passport from date of return)	
Visa Number (to be added at a later date if necessary)	

MEDICAL DETAILS

Blood Group	
Do you have any current medical restrictions/history of physical or psychological health problems? Please specify	
Are you taking any medication? (If yes, state what for)	
Do you have any serious allergies?	
Any special dietary needs? Are you vegetarian? If yes, would you eat meat so not as to offend your hosts?	Yes/No
Do you agree to take responsibility to visit your GP or practice nurse to ensure that appropriate vaccinations/malaria prevention measures are up-to -date?	Yes/No

EMERGENCY CONTACT DETAILS

We need you to give details of 2 people that we can contact in case of any emergencies arising. The first one must be a next of kin.

Name of contact	
Relationship to applicant	
Address	
Telephone Number HOME	
Telephone Number MOBILE	
Email	

Name of contact	
Relationship to applicant	
Address	
Telephone Number HOME	
Telephone Number MOBILE	
Email	

REASONS FOR GOING ON THIS TRIP

Why do you want to go on this overseas team mission?

What is your experience of or interest in other world cultures?

What would you describe as your strengths and weaknesses?

What do you think you will find most challenging on this particular trip?

To what extent are you happy working in a team environment? Give examples...

Describe your involvement within your LifeGroup

How do you maintain and strengthen your spiritual life?

PLEASE TICK ANY SKILLS OR EXPERIENCE YOU HAVE IN ANY OF THE FOLLOWING:

MEDICAL EXPERIENCE	IT EXPERTISE	TEFL
ELECTRICAL	BUILDING	PLUMBING
CHILDREN'S WORK	SPORT	DRAMA
CLASSROOM TEACHER	PRIMARY/SECONDARY	SUBJECT(S)
PLAY MUSICAL INSTRUMENT	INTERCESSION	ART/CRAFT
LEAD WORSHIP	LEADING BIBLE STUDY	PREACHING

PLEASE GIVE FURTHER DETAILS OF ALL OTHER SKILLS AND EXPERIENCE:

APPLICANT'S DECLARATION

I agree that the information on this form is correct to the best of my knowledge. If I am accepted on this team, I agree to follow the 'Team Mission Code of Conduct' and agree to work under the authority of the designated team leader.
Signature
Date

PLEASE RETURN TO:

Global Mission Coordinator
100-102 Winchcombe Street
CHELTENHAM
GL52 2NW