

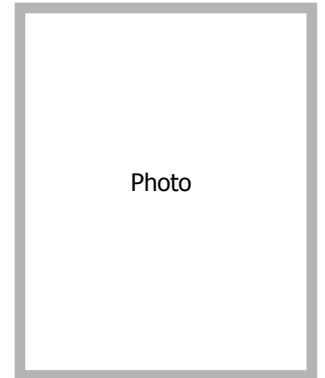
# Evangelical Mission SOS International

Application Form for Mission SOS Festival Teams  
(Will be treated confidentially)



## Festival Teams

Send your application to **Mission SOS, Bethel Temple, 1705 Todds Lane, Hampton, VA 23666**. Please attach a recent photo of yourself. We will contact you once we have received both your application and two recommendations. One recommendation must be from your pastor or other spiritual leader, and the second one may be from a friend. The recommendations must be mailed separately.



### 1. General information

Name in full: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Name and address to next of kin: \_\_\_\_\_ Email: \_\_\_\_\_

Marital status:  Single  Boyfriend/Girlfriend  Engaged  Married

### 2. Personal information

Let us know, on a separate piece of paper, about your upbringing, home conditions, relationships, etc (1/2 a page)

Do you take medicine regularly, or are you currently under medical treatment?  Yes  No

If yes, which ones and/or for what reason? \_\_\_\_\_

Have you encountered problems with reoccurring anxiety and depression?  Yes  No

If yes, please elaborate: \_\_\_\_\_

Have you ever used narcotics or had a drinking problem? \_\_\_\_\_

Have you ever been involved with the occult? \_\_\_\_\_

Do you live in purity? (The answer will not affect your application) \_\_\_\_\_

### 3. Presentation

In what areas are you skilled?

Practical     Music     Drama     Dance     Other: \_\_\_\_\_

I speak the following languages:

|       |                                   |       |                                   |       |                                   |
|-------|-----------------------------------|-------|-----------------------------------|-------|-----------------------------------|
| _____ | <input type="checkbox"/> Fluently | _____ | <input type="checkbox"/> Fluently | _____ | <input type="checkbox"/> Fluently |
| _____ | <input type="checkbox"/> Well     | _____ | <input type="checkbox"/> Well     | _____ | <input type="checkbox"/> Well     |
| _____ | <input type="checkbox"/> I get by | _____ | <input type="checkbox"/> I get by | _____ | <input type="checkbox"/> I get by |

Mention some of your strengths: \_\_\_\_\_

Mention some of your weaknesses: \_\_\_\_\_

How do you think you will function in the team during the festival? \_\_\_\_\_

\_\_\_\_\_

### 4. Spiritual Experience

Briefly tell us, on a separate piece of paper, about your spiritual growth, starting with your salvation (1/2 a page)

When were you baptized? \_\_\_\_\_

When were you baptized in the Holy Spirit? \_\_\_\_\_

What church do you belong to? \_\_\_\_\_ Since when? \_\_\_\_\_

Did you belong to other churches previously? Which ones and for how long? \_\_\_\_\_

Who is your current senior pastor? \_\_\_\_\_

Address and phone number to your church: \_\_\_\_\_

In what way are you, or have you been involved with your church? \_\_\_\_\_

What leaders and/or other persons have had the greatest impact on your life? \_\_\_\_\_

### 5. Miscellaneous

Briefly let us know, on a separate piece of paper, why you want to be part of a Mission SOS Festival Team and what expectations you have for the trip.



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Evangelical Mission SOS International **Recommendation**

Applicant: Please fill in your name and address on both the recommendation forms and hand them to your pastor or spiritual leader, and your friend.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Reference: The applicant has chosen you to recommend him/her and we would appreciate it if you would complete the form as thoroughly as possible. Thank you for your cooperation!

1. How long has the applicant been a born again Christian? \_\_\_\_\_

2. How well do you know the applicant?  Barely  Well  A close friend

3. How long have you known the applicant?  Less than a year  1-2 years  3-5 years  More than 5 years

4. Concerning the applicant, state the consistency of the following

|                                | Regularly                | Often                    | Occasionally             | Seldom                   |
|--------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Bible reading & prayer         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Church attendance              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Witnessing                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Challenging others spiritually | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

5. According to you, is the applicant mature enough to participate in a festival team among the unreached peoples?

Yes  No  Do not know

6. The applicant is specially gifted in the following areas: \_\_\_\_\_

7. Has the applicant ever been involved with the occult? \_\_\_\_\_

8. Do you recommend the applicant?

Yes  No If no, please elaborate: \_\_\_\_\_



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