

8. Indicate any languages with which you are familiar and your degree of proficiency:

Applicant/Spouse	Language	Formal Study (Y/N)	Where Studied	Proficiency 0=Low 10=Fluent

9. Have you had any previous experience in a foreign country? (Circle one) YES NO

If yes, on a separate sheet of paper, please tell us about: Who went, what city/country, length of stay, type of ministry, experiences and reason for leaving. (please indicate question #9)

FAMILY

10. List your children who are under 23 years of age. If currently expecting a child, give the due date. If adopted, please indicate.

Name	M/F	Date of Birth	Place of Birth	Adopted

11. List full name(s) of your children who are 23 years of age or older.

Name	State/Country	Date of Birth

12. List any serious illnesses or disabilities, emotional difficulties, learning disabilities or problems of substance abuse you or any family member living with you may have or have had in the past:

Name of Individual	Illness or Disability

FINANCIAL DEBT/OBLIGATION

13. List your financial obligations and debts below:

Obligation/Debt	Total Amount	Monthly Payment	Plan for meeting it
Rent/Mortgage (circle one)			
Student Loan			
Car(s)			
Credit Card(s)			
Insurance (life, car, home)			
Medical Insurance			
Pledge(s)			
IRS			
Other:			

14. If you have financial responsibilities for parents or other relatives, please explain:

15. Are you current in your financial obligations? YES NO If no, please explain on a separate piece of paper. (please indicate question #15).

16. Do you faithfully practice tithing? (Circle one) YES NO

17. Have you ever opted out of paying Social Security? (Circle one) YES NO

If yes, the date you opted out: _____

If yes, have you re-entered into the Social Security system? (Circle one) YES NO

18. Previous organizations you have held credentials with and dates.

Applicant/Spouse	Organization Name	Type of Credential	Dates Held

19. Have you ever resigned your ministerial credentials or had them suspended or revoked by any organization? If yes, please explain.

Applicant: YES NO _____

Reason for suspension or revocation

Spouse: YES NO _____

Reason for suspension or revocation

PLEASE USE A SEPARATE PIECE OF PAPER IF NEEDED TO COMPLETE THE FOLLOWING QUESTIONS.

Please identify the question # before each answer.

20. Have you ever received, asked for or been asked to receive counseling by any organization? YES NO If yes, please explain.

21. What kind of home life did you have growing up?

22. Tell us about your conversion.

23. Please describe your current ministry involvement in your home church.

24. Please describe your call to missions.

25. Will you be working alongside an established Christian Ministry? (Circle one) YES NO

If yes, give us the name and address of ministry.

If no, where will your ministry take place?

26. What ministry do you feel called to? (Describe your call to missions ministry.)

27. What kind of training have you had that prepares you for the missions ministry you have described?

28. How do you see yourself supported in missions? Any financial pledges/commitments already?

29. Do you have a sending church? (Circle one) YES NO

If yes, give church name, church contact & address:

30. Will they support you financially? (Circle one) YES NO Explain.

31. Do you have an idea of the budget you will need? (Circle one) YES NO If yes, please provide.

32. Please explain any hesitations you may have concerning any of the above information:

33. Please give us 3 qualified references (described below) Name, address and phone number(s).

1. Senior/Missions Pastor of your Home church.

PLUS two of the following three options:

1. Missionary/short-term mission team leader you have worked/interacted with in missions work.

2. An additional pastor, elder or religious leader who is familiar with your ministry.

3. Close friend (not a relative) who knows your character well.

Having prayerfully considered my lifework and desiring to fulfill what I believe to be God's will for my life, I hereby make application for appointment to missionary service. I am a member in good standing of International Ministerial Fellowship (IMF) and agree to abide by the policies and procedures of IMF Missions.

Initial beside each document listed below showing you have read and understand these documents:

_____ Serving Missionaries Around the World brochure
_____ Pre-Field Missionary Assessment brochure
_____ Missions Services Fee and Rates (All Fee & Rates are subject to change without notice)

- Enclosed is a check for \$ _____ to cover the cost of the pre-field assessment(s) for applicant & spouse, if applicable.
*Children may also be included if you are going to a foreign country.

Applicant's Signature: _____

Spouse's Signature: _____

Date: _____

A photocopy of this application should be kept for your records.

RETURN TO: IMF
Missions Department
P. O. Box 32366
Fridley MN 55432-0366