

## Global Ministries Mission Personnel Office P.O. Box 1986, Indianapolis, IN 46206 317-713-2567

GLOBAL SERVICE APPLICATION				
Basic Data				
First Name	MI	Last Name		Social Security #
Address				Home Phone
City	State	ZIP	Cell Phone	Work Phone
E-mail	-	JS Citizen? $\Box$ You have the legal right		in the US?   Yes   No
Date of Birth:		Place of Birth:		
What is your primary language?		What other languages do you speak? Levels: T = Tourist; C = Conversational; NF = Near fluent; F = Fluent?		
Name and address of a person who can always reach you: Name Address				
City/State/Zip				
Phone ( )				
	Availabi	lity and Prog	ram	
Desired length of service ( $\checkmark$ $\checkmark$	-double che	ck first preference	; $\checkmark$ -single check all other	possibilities)
□ □ more than 4 years □ □ 2 yea □ □ 2-4 years □ □ 6-12 r		□ □ 3-6 mon □ □ less thar		□ summer service only
Date available for service:		Keep application open until this date:		
What issues/factors could affect: a) your availability:		<ul> <li>Program preference (refer to descriptions in cover letter)</li> <li>✓ ✓ - double check first preference:</li> <li>✓ - single check all other possibilities:</li> </ul>		
b) your ability to complete the intended period of service:		<ul> <li>□ - Fully Supported Missionary Service</li> <li>□ - Global Mission Intern</li> <li>□ - Long-term Volunteer (1 year or more)</li> <li>□ - Short-term Volunteer (less than 1 year)</li> <li>□ - Global Associate</li> </ul>		

Page 2

Name:

Assignment - Check appropriate boxes				
<ul> <li>Open to discuss a variety of position/program options</li> <li>Particular interest in the following positions/programs:</li> </ul>	<ul> <li>Open to serving in a variety of geographical settings</li> <li>Particular interest in the following geographic regions:</li> </ul>			
Types of Mission Service for which you believe you can do well in an inte	rnational context: (check <u>all</u> that apply):			
Community Development / Agriculture: specify field				
Evangelism: special interest area				
Health Care: field / specialization				
Leadership development: (post-secondary/graduate/theology)				
Medical doctor / RN / LPN				
Pastoral				
Other: specify				
Service under the auspices of Global Ministries is open to members of	embership Christian Church (Disciples of Christ) and the United Church of Christ tibility with GM mission objectives is an expectation.			
Name of Congregation	Denomination			
Address	Name of Pastor			
City/State/Zip Describe your involvement in your congregation/church:	Phone ( )			
Describe your involvement in your congregation/charch.				
Volunteer Service				
Describe your involvement in civil or volunteer service:				

Page 3

Name:

Education						
School Name & Location	Course		Years Attended	Degree & Date		
High School						
College or University						
Graduate Study / Seminary						
Business/Trade/Technical or Other Schools						
Other / Continuing Education						
Honors or Awards						
Emp Begin with current or most recent employer. Inclu	ployme de those p	ent History positions for which you worked more than 20 hours per week.				
1. Employer Name		Position Title				
Address		Date employed: From/Te	0			
City/State/Zip		Description of responsibilities				
May we contact this employer at this time?						
2. Employer Name		Position Title				
Address		Date employed: From/To	0			
City/State/Zip		Description of responsibilities				
May we contact this employer at this time?						
3. Employer Name		Position Title				
Address		Date employed: From/T	0			
City/State/Zip		Description of responsib	ilities			
May we contact this employer at this time?						

Employment History, cont.			
4. Employer Name	Position Title		
Address	Date employed: From/To		
City/State/Zip	Description of responsibilities		
May we contact this employer at this time?			
Occupation	n and Skills		
Occupation (if student, intended occupation)			
Principal job-related skills you possess that may be used in an international context			
Other skills or abilities ( <b>P</b> -Professional Training; <b>E</b> =Experienced; <b>H</b> =Hobby/non-technical ability)			
Job-related Licenses or Certificates / State or Licensing Agency / Expiration Date			
Marital	Status		
□ Single never married	Separated - date of separation:		
Engaged - date of wedding:	Previously married - date of dissolution:		
☐ Married - date of marriage:	□ Widowed		
Full Name of Spouse	Citizenship of Spouse		
If you are married, does your spouse plan to accompany you? <b>Couples Please Note</b> : Each adult intending to live in the assigned country needs to fill out a separate Mission Personnel Information form whether or not he/she seeks a mission assignment.			

Page 5

<b>Family</b> Provide information about your dependents. Place a "✓" by those who will accompany you to the country of service.					
$\checkmark$	Full Name		Date of Birth	Citizenship	
	Placement may be influenced by	Placement and N such factors as finances, housing, e		nildren or other family or p	personal issues.
Fina P	ncial considerations: Do you have p res D No (If yes, please e		at might influence the ty	vpe and length of assignm	ent you could accept?
Life : Thes	situations: Service in international se e issues may affect a person's ability	ettings may present challenges related to live and work in a particular setting	ed to health, environme ng. Indicate below any	ent, climate and security a concerns you have relate	among others. ed to the following:
	viet 🛛 Environment	Availability of medical care/med	cations		
ΠE	xercise  Climate	Security Other -			
	<b>Iren's education</b> (if applicable): If yo k <u>all</u> that apply)	u have or expect to have school age	e children during your to	erm of service, are you op	pen to:
	acal schools (non-English)	Boarding school in English	anguage school		
	Local schools (non-English)       Boarding school in English language school         Local schools (English language)       Home school				
Comments:					
Passport Information A passport is necessary for international service. If you currently have a passport, indicate below:					
FULL	Name (as it appears on passport)	Passport Number	Country of Issue	Issue Date	Expiration Date
i uli l	name (as it appears on passport)		Country of ISSUE	ISSUE DALE	

Global Ministries Personal Information Request

Page 6

Name:

Legal Considerations			
Misconduct Policy Certification:			
[a] Has any civil, criminal, or ecclesiastical complaint ever been sustained or brought against you for misconduct (financial, sexual or other)?			
[b] Have you ever resigned or been terminated from a position for reasons	related to sexual misconduct or financial or other misconduct?		
Prior or Pending Offenses:			
[a] Have you ever been convicted of, pled guilty to or pleaded "no contest"	' to any crime, other than minor traffic violations?		
[b] Are any charges (for any offense, including traffic offenses), civil suits,	or judgments outstanding against you?		
Provide four names, including: past	ences or, professional/academic, employer nation neatly and clearly		
1 - Name	2 - Name		
Relationship to you	Relationship to you		
Occupation	Occupation		
Phone ( )	Phone ( )		
E-mail	E-mail		
Address	Address		
City/State/Zip	City/State/Zip		
3 - Name	4 - Name		
Relationship to you	Relationship to you		
Occupation	Occupation		
Phone ( )	Phone ( )		
E-mail	E-mail		
Address	Address		
City/State/Zip	City/State/Zip		
Additional Information			
How did you learn about mission opportunities with the Global Ministries? Check all that apply.			
<ul> <li>Pastor</li> <li>Friend / family</li> <li>Printed materials / announcement at church</li> <li>Mission event / festival</li> <li>Contact with GM staff person</li> </ul>	<ul> <li>College career service office</li> <li>College professor</li> <li>Surfing the web</li> <li>Advertisement</li> <li>Other: specify -</li> </ul>		

Global Ministries Personal Information Request

	For Disciple, UCC and Clergy from other denominations - others, skip this section NOTE: You need to notify your regional/conference minister that you are in conversation with Global Ministries. We will seek a reference from that office.			
Che	eck here if you have notified your regional/conference office		Date and location of ordination:	
Name of regional/conference minister:			Ecclesiastical Authority:	
	PLEASE READ CAREF	JLLY BEFORE SIGNING		
1.	All information provided on this Mission Personnel Information form is	complete and accurate, to the best of my l	knowledge.	
2.	Candidates who serve with the Global Ministries (GM) will be expected	d to understand, respect and support the n	nission of the GM.	
3.	Misrepresentation of facts in this Personal Information Request form v may be sufficient cause for dismissal.	vill disqualify me from further consideration	or, if I serve with the GM,	
4.				
5.	Any position offered to me is contingent upon the satisfactory complet psychological testing or examinations as may be requested by the GM		cks, physical and	
6.	6. I understand that nothing contained in this form, or in the granting of an interview is intended to create a contract between the GM and me, either for employment or for the providing of any benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the GM unless made in writing.			
7.	The GM has my permission to investigate, at its discretion, my past er pertinent or relative contained in this Mission Personnel Information for		d any other information	
8.	I fully agree to the statements and conditions listed in 1 through 7 abo	ve.		
Ар	plicant's Signature		Date	
	Use the checklist below to ensure your Persona	I Information Request form package is o	complete:	
<ul> <li><u>Complete</u> and <u>sign</u> the <b>Personal Information Request</b> form</li> <li><b>Spouse</b> provides a <u>separate</u> Personal Information Request form (if applicable)</li> <li><b>Reference information</b> printed <u>neatly</u> and <u>clearly</u></li> <li>Include your <u>name</u> on the top of each page of your responses to the <b>Narrative Section</b></li> <li>Include a <b>résumé</b> with your completed materials</li> </ul>				
	nd completed Personal Information Request form, rrative section and résumé to:	Questions related to completing the Personal Information Request form can be directed to staff of GM:		
GI	obal Ministries	Phone: 317.713.2567		
Mission Personnel Office P.O. Box 1986 Indianapolis, IN 46206		E-mail: cnichols@dom.di	sciples.org	

## Name:

## PERSONAL INFORMATION REQUEST NARRATIVE SECTION

Write your responses on a separate sheet of paper - be sure to include your name at the top of each page. The total of your responses should not be more than two or three typed pages.

1. How has your understanding of the Christian faith influenced your decision to pursue an overseas church assignment?

2. Please give a brief statement of your understanding of mission in today's world and the church's role in that mission.

- 3. What do you see as your gifts and aptitudes which equip you to serve in that mission?
- 4. Describe any cross-cultural experiences you have had. What did you learn about your ability to live and work in a cross-cultural context? (If you have had limited cross-cultural experience, describe how you see yourself living and working in a cross-cultural context.)

5. What other information or considerations to your candidacy do you wish to communicate?

## **Background Disclosure Statement**

Global Ministries of the Christian Church (Disciples of Christ) and the United Church of Christ

Global Ministries of the Christian Church (Disciples of Christ) and the United Church of Christ attempts to match gifted individuals and families with opportunities of service in a variety of settings, worldwide. Successfully carrying out this purpose on behalf of the denomination requires honesty, effort, and a commitment to open communication on the part of both the organization and the persons seeking such service.

Congruent with the concern for ethical performance of ministry on behalf of the Christian Church (Disciples of Christ) and the United Church of Christ, and with a view to addressing issues which are sensitive to functioning in the public role of a missionary for Global Ministries, you are asked to respond to the following statements. There is opportunity for explanation if you so desire.

The information contained in this disclosure will be considered confidential. However, it may also be shared with partnering agencies/institutions with which Global Ministries has cooperative agreements/relationships to meet their respective screening requirements.

1. Has a civil lawsuit, felony charge, ecclesiastical discipline, workplace disciplinary action or other legal or official complaint been sustained against you for sexual, racial, ethnic, age discrimination, harassment, exploitation or misconduct; physical abuse; child abuse; or financial misconduct?

Yes \_\_\_\_\_ No \_\_\_\_

2. Have you ever been convicted of a misdemeanor or a felony?

Yes \_\_\_\_\_ No \_\_\_\_ Explanation:

3. Has your employment ever been changed because you attempted or actually engaged in:

٠	sexual, racial, ethnic, age discrimination, harassment, exploitation	Yes	No
	or misconduct		
•	physical abuse	Yes	No
•	child abuse	Yes	No
•	financial misconduct	Yes	No

4. Has your employment ever been changed in order to avoid facing or to avoid being terminated because of charges of actual or attempted:

•	sexual, racial, ethnic, age discrimination, harassment, exploitation or misconduct	Yes	No
•	physical abuse	Yes	No
•	child abuse	Yes	No
•	financial misconduct	Yes	No

Explanation:

5. Have you ever received professional treatment for reasons related to misconduct on your part?

Yes \_\_\_\_\_ No \_\_\_\_\_ Explanation (please attach additional paper as needed):

6. Has such treatment ever been recommended or requested on your behalf?

Yes \_\_\_\_\_ No \_\_\_\_\_ Explanation (please attach additional paper as needed):

Signature:

Date:

Type or print your name:

Witness:

Witness:

(This form is included for your information. It is not to be completed and signed until you have been approved for an assignment by the Board of Directors.)