



Short-term Mission Application Form

Please email a photo with your application

Please read all the accompanying information and answer all the questions.

I am interested in this particular area(s) of service: (eg. OM Ship, Country, type of ministry, etc)

Order of preference: 1. _____ 2. _____ 3. _____

Available from: _____ year: 20 _____ For a period of service of: _____

Parental Consent:

Are you under 18 years of age? No Yes

If you are under 18 years of age, your parent or guardian must sign a consent form for you to join OM.

A. PERSONAL DETAILS

Christian Names: _____ Surname: _____

Preferred First Name: _____ Date of Birth: / / Gender: M F

Present Address: _____

Permanent Address (if different): _____

Phone (H): _____ Phone (W): _____

Mobile: _____ Email: _____

Marital Status:

- Single
- Engaged (Date: _____)
- Widowed (Date: _____)
- Separated (Date: _____)
- Serious Relationship (Since: Year)
- Married (Date: _____)
- Divorced (Date: _____)
- Remarried (Date: _____)

Full Name of Spouse: _____

Child's Name: _____ Date of Birth: / / Gender: M F

Child's Name: _____ Date of Birth: / / Gender: M F

Child's Name: _____ Date of Birth: / / Gender: M F

Child's Name: _____ Date of Birth: / / Gender: M F

Child's Name: _____ Date of Birth: / / Gender: M F

If you are in the process of applying for a passport, please complete and send in the rest of the application form so we can begin the application process. You can send in the passport information later.

Your Full Name as in Passport: _____

Passport Number: _____ Nationality: _____

Place of Birth: _____ Place of Issue: _____

Date of Issue: / / Date of Expiry: / /

B. FAMILY

Name of Your Parents/Next of Kin: _____

Address: _____

Phone (H): _____ Phone (W): _____

Mobile: _____ Email: _____

How do they feel about you joining OM? _____

Would they like us to send them helpful information for Parents of Missionaries? _____

Name of Person to Contact in Case of Emergency

Name: _____ Relationship to you: _____

Address: _____

Phone (H): () _____ Phone (W): () _____

Mobile: _____ Email: _____

C. EDUCATION & PREVIOUS OCCUPATION

Current Occupation: _____

Education/Qualifications:

*****Please attach your current CV*****

EMPLOYMENT HISTORY

If you have NOT included your CV, briefly list all your employment with dates and length of time in each job:

_____ From: _____ To: _____
 _____ From: _____ To: _____
 _____ From: _____ To: _____
 _____ From: _____ To: _____

Have you ever been made redundant or asked to leave from a job? No Yes

If 'yes' please give details: _____

Describe your current relationships with friends and colleagues at work or college: _____

What language/s do you know? (F - for Fluently, C - Conversational, P - Phrases Only)

LANGUAGE	READ F/C/P	WRITE F/C/P	SPEAK F/C/P
	(Please select)	(Please select)	(Please select)
	(Please select)	(Please select)	(Please select)
	(Please select)	(Please select)	(Please select)

D. YOUR CHRISTIAN FAITH & TESTIMONY

Explain *briefly* who you believe Jesus is and why He came to earth? _____

How would you *briefly* explain to someone what 'Salvation' is, and what one must do to be 'saved'? _____

What is your view of the Bible? Some people see it as a collection of myths or interesting historical material. Others regard it as inspired by God. What is your conviction and why?

How much of the Bible have you read? _____

In John's Gospel, chapter 14:6, Jesus says "I am the way and the truth and the life. No one comes to the Father except through me" (NIV). **How do you think this verse applies today in multicultural New Zealand, where there are many people of other faiths or no faith?** _____

What do you believe happens to someone who dies without coming to a firm faith in Jesus Christ? _____

How would you define 'Christian Mission'? _____

How long have you been a Christian?

Briefly give your testimony of HOW & WHEN you became a Christian. _____

What has had the most impact on your life as a Christian over the past couple of years?

Church Currently Attending: _____

Denomination: _____

Pastor's Name: (for a reference) _____

Address: _____

Phone: _____ **Mobile:** _____

Email: _____ **Website:** _____

What Christian service (church/ministry,etc) have you been involved with and how long? _____

What are your reasons for applying to OM and the specific field you have chosen? _____

Please state preference of ministry (Evangelism; Administration; Children's Ministry; etc): _____

Are you seriously considering long-term missionary service? Please give details: _____

Please give the name and contact details of ONE other person who knows you well, and that we can ask to provide a reference.

Name: _____

Address: _____

Phone: _____ **Mobile:** _____

Email: _____

E. WHAT WAS HELPFUL?

Please indicate the things that were significant to you in hearing about OM and deciding to join?

(Pick more than one if you wish and add more details on the next page if you can)

- OM Publications Talked to an OMer Heard via School/College
- OM Website Missions Camp/Conference OM Event
- OM Speaker OM Presentation Team Heard via home/church
- Other: _____

Details of above items: (please give name, place and date/year if you can.) _____

What do you think we can do to more effectively help people just like you hear about mission and get involved? _____

F. OM LINKS

Previous OM Experience:

- A) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: _____ Role: _____
- B) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: _____ Role: _____
- C) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: _____ Role: _____

F. OTHER MISSION LINKS

Previous Mission Experience:

- A) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: / / Role: _____
- B) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: / / Role: _____
- C) Group: _____ Location (Country/City): _____
- Start Date: / / End Date: / / Role: _____

Have you ever been turned down by another mission or dismissed from it?

No Yes (please explain why and with whom?)

G. MEDICAL

We will send you a medical questionnaire later in the application process, but please indicate any medical or dietary conditions that we need to be aware of: _____

(attach a separate sheet if necessary)

H. MISCELLANEOUS

Do you possess a valid driver's license? No Yes

License Number: _____ Exp Date: _____ Years Driving: _____

Do you have any debts and/or financial commitments? No Yes

Please give Details: _____

Data Protection Agreement:

By signing below, (or typing my name and sending this document back via email,) I agree to relevant parts of my personal data being passed to other ministries of OM in connection with my service with the organisation. These ministries include the OM New Zealand National Office and the OM Field offices.

I understand my records will be handled responsibly and in accordance with the OM Data Security Policy, although the ministries may operate in countries where I may no longer have rights under data protection law. I understand OM will endeavour to protect my privacy at all times and within Data Protection Laws of related countries.

I understand that OM New Zealand may reject my application with or without cause by service of written notification.

I understand that OM New Zealand may pass my name, email address and phone number on to other participants going to the same outreach to coordinate travel and/or get in touch with one another.

By typing my name (below), I authorise that I have signed this document.

Name (Email – type OR Print - sign): _____ Date: _____

Please Return To The Email Address Below:

Dave.Fern@om.org

If unable to return by email, please print out and mail to:
OM New Zealand, Personnel Manager, PO Box 76 882, Manukau 2241
Phone: (09) 9280802