

Wynne Baptist Church Short-Term Missions Checklist

The applicant must provide the following before they will be allowed to participate in a short-term mission trip.

Please be aware that the information provided on this application will only be seen by the Pastor of Discipleship & Missions and your mission trip team leader. Your testimony will be shared with the Missions Committee.

Applicant's Name: _____

Trip: _____ Trip Dates: _____

- | | Accepted By |
|--|-------------|
| <input type="checkbox"/> Completed and signed Short-Term Missions Application (p. 2-3) | _____ |
| <input type="checkbox"/> Copy of Yellow Fever International Card & Immunization Record (if required for Mission Trip) | _____ |
| <input type="checkbox"/> A brief testimony of your salvation experience | _____ |
| <input type="checkbox"/> 4 copies of your passport (if passport is required for Mission Trip) | _____ |
| <input type="checkbox"/> 2 glossy passport sized photos (if passport is required for Mission Trip) | _____ |
| <input type="checkbox"/> At least 2 letters of reference from someone other than your family (pastor, small group leader, co-worker, etc.) – some trips may require more | _____ |
| <input type="checkbox"/> Completed and signed Mission Experience Information form (p. 4-7) | _____ |
| <input type="checkbox"/> Completed and signed Background Check Authorization form (p. 8) | _____ |
| <input type="checkbox"/> Completed and notarized Acknowledgment and Release form (p. 9) | _____ |
| <input type="checkbox"/> Signed The Essentials We Believe form (p. 10-11) | _____ |
| <input type="checkbox"/> Required deposit for Mission trip | _____ |

WYNNE BAPTIST CHURCH
Short-Term Missions Application
(Please Print Legibly)

Name _____ Date of Birth: ___/___/___

Address: _____
Street, P. O. Box, Apt. No. City State Zip

Home Ph.(____) _____ Cell Ph.(____) _____

Work Ph.(____) _____

E-mail: _____

Spouse: _____ Children: _____

Name exactly as on Passport (print): _____

Passport #: _____ Expiration Date: ___/___/___

Issuing Authority: _____
Office of Issue

Emergency Contact Person _____

Relationship: _____

Address: _____
Street, P. O. Box, Apt. No. City State Zip

Home Ph.(____) _____ Cell Ph.(____) _____

Trip Insurance Beneficiary: _____ Relationship: _____

Beneficiary Address _____
Street, P. O. Box, Apt. No. City State Zip

Secondary Trip Insurance Beneficiary: _____ Relationship: _____

(If beneficiary plans to travel with you, then choose a secondary beneficiary.)

Beneficiary Address _____
Street, P. O. Box, Apt. No. City State Zip

Name of Church of Membership: _____

Date Joined ___/___/___

Completed Sharing Your Faith or a Wynne Baptist Church Evangelism Class?

___ Yes ___ No Date Completed ___/___/___

Active in local/foreign missions ___yes ___no (list below)

Foreign Language(s)_____

List any skills you may have (construction, teaching, administrative, etc)_____

Applying for Trip to:_____ Date of Trip:___/___/_____

Cost of Trip: \$_____

Check here ___ if applying for a scholarship. If applying, review the **WBC Missions Scholarship Guidelines** and complete a **WBC Missions Scholarship Application**.

Please list any known allergies – food or others.

Please detail below any physical or mental problems you now have, or have had, that would hinder your ability to fulfill your obligations on this mission trip.

Please make sure the following are included with your application:

- Attach a brief testimony of your salvation experience.
- 2 letters of reference from someone other than your family (pastor, small group leader etc.)
- Attach a copy of Yellow Fever International Card and Immunization Record, if required for your Mission trip.
- Attach 4 photocopies of your passport, if a passport is required for your Mission Trip.
- Attach 2 glossy passport sized photos, if a passport is required for your Mission Trip.

Signature:_____ Date:_____

Wynne Baptist Church Mission Experience Information

Please complete all questions. If additional space is needed to answer questions feel free to use the back of this questionnaire. You may use additional paper if needed to answer any of the questions.

1. What experience do you have in presenting the gospel?

2. Is this your first mission experience? If not, in what mission trips/activities have you participated?

3. In what Adult Bible Study, Bible study, small group or ministry are you currently participating?

4. How often do you attend Wynne Baptist Church?

___ Less than twice a month ___ Twice a month ___ More than twice a month

5. Comment on your willingness and ability to help serve the team in any way you can.

6. How well do you deal with uncertainty and change?

7. How well would you rate yourself in flexibility and adaptability?

___ Very flexible ___ Somewhat flexible ___ Not very flexible

8. How well do you take instructions?

9. Would you be willing to forego personal preferences to honor foreign cultures?
10. Describe (if any) cross-cultural living, training and/or travel experiences that you have. What did you learn? What types of difficulties did you experience?
11. Briefly describe any major life changes you have gone through in the past year (e.g. job or family changes, illness, injury, death of a relative or close friend etc.).
12. What is your motivation for going on this mission trip and how do you know God has called you to participate in a mission trip?
13. To the best of your knowledge, please describe your...
- Strengths:
- Spiritual gifts:
- Weaknesses or areas in which you desire growth:

14. Describe your personal devotional habits (i.e. quiet time, prayer, etc.):
15. Describe your growth and involvement in intercessory prayer or prayer walking.
16. Have you ever been denied a visa (a request for permission to enter a country) or had a visa revoked?
 Yes No
If yes, for which country and what were the circumstances?
17. Have you struggled with any sexual sins in the last 2 years?
 Yes No
If so, would you be willing to discuss this with a pastor? Yes No
18. Do you regularly use or have you been addicted to any substances in the last 2 years?
 Yes No
If so, would you be willing to discuss this with a pastor? Yes No
19. Explain any difficulties you may have working with Christians who have doctrinal viewpoints different from you own.
20. Suppose you felt the leading of the Holy Spirit to take a direction or to act differently than what your team leader instructs. How would you handle this?
21. In keeping with Wynne Baptist Church and the International Mission Board Child Protection Policies for staff and volunteers, have you had a background check performed by any WBC volunteer ministry in the past 2 years? Yes No

If not, please complete the enclosed authorization form (p. 8) and return it to Mike Shipp in the Missions office.

The following questions are required by Wynne Baptist Church and the International Mission Board in order to participate in any mission effort.

22. Bearing in mind that your proposed service may involve access to minor children, is there anything in your personal history or experience that indicates that you have any problem whatsoever involving sexual attraction to children or any related tendencies that could pose a risk of harm to any children you may encounter during your service? If yes, explain briefly.
23. Have you ever been the subject of a complaint of child abuse or any other type of mistreatment of children? If yes, please explain briefly.
24. Has anyone ever complained to you, the organization you were serving with, or to the government concerning your care of children? If yes, please explain briefly.
25. Have you ever been charged with or convicted of any crime or misdemeanor involving a) a minor child, b) stalking or harassment, c) sex or lewd behavior (i.e. rape, sexual assault, prostitution, public indecency), or d) violence against another person? If yes, please explain briefly.
26. Please list any questions that you would like answered:

To the best of my ability, I have answered all questions honestly.

Signature

Date

Name (please print)

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address From: _____
(Mo/Yr) (Street) (City) (State/Zip)

Previous Address From: _____
(Mo/Yr) (Street) (City) (State/Zip)

Social Security Number: _____ DOB: _____
(mm/dd/yyyy)

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize **Wynne Baptist Church** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **Wynne Baptist Church** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

Wynne Baptist Church and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____

Notice to California, Minnesota and Oklahoma Residents:
Please check the box below if you wish to receive a copy of a consumer report that is requested.
 I wish to receive a copy of any Background Check Report on me that is requested.

Wynne Baptist Church
Acknowledgment and Release

1. _____ (name) do hereby consent to participate in a trip from Wynne, Arkansas to _____ (location of trip) and return, which has been arranged by Wynne Baptist Church, Inc., an Arkansas non-profit corporation ("Church"). In consideration of the Church making arrangements for this trip I hereby agree as follows:

A. I am responsible for my own immunizations. I understand lists of required and recommended immunizations for the country I visit are issued, *updated*, and maintained by the International Mission Board of the Southern Baptist Convention and the United States Government; and immunizations are administered by private physicians, and others. I acknowledge that I have a specific health history and needs and will review the referenced lists of required and recommended immunizations and sources, with my independent health professional if necessary, to determine immunizations and sources that are required for my particular situation; and will be responsible to obtain necessary immunizations.

B. In the event that I require medical and/or dental treatment while on the mission project or traveling to or from the project, I hereby consent and give my permission to the mission leader to consent to any X-ray; injections; anesthesia; medical, dental or surgical diagnosis and treatment advised and supervised by a physician, surgeon or dentist licensed to practice under the laws of the nation and state where the services are rendered, either as an outpatient or in any hospital.

C. I hereby release the Church (which term shall also include its Pastors, Trustees, employees, agents, and shall also include all members of the Church as well as any other entity which might be affiliated with the Church) from any and all responsibility or liabilities in the event of illness, injury or death during the period of travel from the time of departure to the time of return or from the result of any event during the period of travel, not the direct and proximate result of the willful and wanton negligence of the Church or its Pastors, Trustees, employees agents, or members on account of any such illness, injury or death.

D. I agree to indemnify and hold harmless the Church, its Pastors, Trustees, employees, agents, and members from and against any claim or liabilities, including the cost of defense, asserted on my behalf or on behalf of any third party, of any nature whatsoever and whether in tort or contract, or otherwise.

E. I hereby acknowledge that the Church is acting solely in the context of facilitating travel arrangements, orientation and providing indirect logistical support for this trip and should in no way be deemed to be liable for any loss or damage resulting from changes in the itinerary of said trip, that is not the result of the willful and wanton negligence of the Church.

Participant's Signature
Parent or Guardian Sign if Minor

Date

CERTIFICATE OF ACKNOWLEDGMENT

State of _____ County of _____ . On _____, 20____ before me, _____, Notary Public in and for said county, personally appeared _____ who has satisfactorily identified him/herself as the signer to the above referenced document.

My commission expires _____

Notary Public

MUST BE SIGNED IN THE PRESENCE OF A NOTARY

THE ESSENTIALS WE BELIEVE

• ABOUT GOD

God is the Creator and Ruler of the universe. He has eternally existed in three personalities: the Father, the Son, and the Holy Spirit. These three are co-equal and are one God.

Genesis 1:1,26,27,3:22; Psalm 90:2; Matthew 28:19; I Peter 1:2; II Corinthians 13:14

• ABOUT JESUS CHRIST

Jesus Christ is the Son of God. He is co-equal with the Father. Jesus lived a sinless human life and offered Himself as the perfect sacrifice for the sins of all people by dying on a cross. He arose from the dead after three days to demonstrate His power over sin and death. He ascended to Heaven's glory and will return again someday to earth to reign as King of Kings and Lord of Lords.

Matthew 1:22,23; Isaiah 9:6; John 1:1-5; 14:10-30; Hebrews 4:14,15; I Corinthians 15:3,4; Romans 1:3,4; Acts 1:9-11; I Timothy 6:14,15; Titus 2:13

• ABOUT THE HOLY SPIRIT

The Holy Spirit is co-equal with the Father and the Son of God. He is present in the world to make men aware of their need for Jesus Christ. He also lives in every Christian from the moment of salvation. He provides the Christian with power for living, understanding of spiritual truth and guidance in doing what is right. He gives every believer a spiritual gift when they are saved. As Christians, we seek to live under His control daily.

II Corinthians 3:17; John 16:7-13. 14:16,17; Acts 1:8; I Corinthians 2:12,3:16; Ephesians 1:13, 5:18; Galatians 5:25

• ABOUT THE BIBLE

The Bible is God's Word to us. It was written by human authors, under the supernatural guidance of the Holy Spirit. It is the supreme source of truth for Christian beliefs and living. Because it is inspired by God, it is the truth without any mixture of error.

II Timothy 3:16; II Peter 1:20,21; II Timothy 1:13; Psalm 119:105,160, 12:6; Proverbs 30:5

• ABOUT HUMAN BEINGS

People are made in the spiritual image of God, to be like Him in character. People are the supreme object of God's creation. Although every person has tremendous potential for good, all of us are marred by an attitude of disobedience toward God called "sin."

This attitude separates people from God and causes many problems in life.

Genesis 1:27; Psalm 8:3-6; Isaiah 53:6a; Romans 3:23; Isaiah 59:1.2

• ABOUT SALVATION

Salvation is God's free gift to us, but we must accept it. We can never make up for our sin by self-improvement or good works. Only by trusting in Jesus Christ as God's offer of forgiveness can anyone be saved from sin's penalty. When we turn from our self-ruled life and turn to Jesus in faith we are saved. Eternal life begins the moment one receives Jesus Christ into his life by faith.

Romans 6:23; Ephesians 2:8,9; John 14:6, 1:12; Titus 3:5; Galatians 3:26; Romans 5:1

• ABOUT ETERNAL SECURITY

Because God gives us eternal life through Jesus Christ, the true believer is secure in that salvation for eternity. If you have been genuinely saved, you cannot "lose" it. Salvation is maintained by the grace and power of God not by the self-effort of the Christian. It is the grace and keeping power of God that gives us this security.

John 10:29; II Timothy 1:12; Hebrews 7:25, 10:10, 14; I Peter 1:3-5

• ABOUT ETERNITY

People were created to exist forever. We will either exist eternally separated from God by sin, or eternally with God through forgiveness and salvation. To be eternally separated from God is Hell. To be eternally in union with Him is eternal life. Heaven and Hell are real places of eternal existence.

John 3:16; John 14:17; Romans 6:23, 8:17-18; Revelation 20:15; I Corinthians 2:7-9

By signing this form I am indicating that I have read the information concerning the beliefs of Wynne Baptist Church. Furthermore, I will not do anything to undermine these beliefs and I will submit to the authority of the team leader while I am on a mission trip with Wynne Baptist Church.

Signature: _____ Date: _____

