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Please do not staple

## INDIVIDUAL APPLICATION

MINISTRY \_\_\_\_\_ DATES \_\_\_\_\_

LOCATION \_\_\_\_\_

FULL LEGAL NAME \_\_\_\_\_  
*(as it is or will be on your passport)*

PASSPORT # \_\_\_\_\_ PASSPORT EXPIRATION DATE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_

MALE OR  FEMALE CITIZENSHIP \_\_\_\_\_

**PRESENT ADDRESS:** Dates at this address, if temporary: \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**PERMANENT ADDRESS** (if different than above):

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PHONE: Home \_\_\_\_\_ Cell \_\_\_\_\_

E-MAIL \_\_\_\_\_ SKYPE NAME \_\_\_\_\_

HOW DID YOU LEARN ABOUT IM? (If a certain person, please give name) \_\_\_\_\_

### **CHURCH & MINISTRY INVOLVEMENT:**

What church are you attending? \_\_\_\_\_ Denomination \_\_\_\_\_

How have you been involved in ministry? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Office Use Only:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORK HISTORY:** (Begin with the most current, full- or part-time.)

Position	Responsibilities	Company	Dates

**CROSS-CULTURAL EXPERIENCE:**

Place or People Group	Dates	Purpose

**HEALTH:**

List any chronic ailments, physical disabilities or limitations that could be an issue during this ministry trip:

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Describe any treatment you have had for emotional problems: \_\_\_\_\_

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**PERSONAL EXPERIENCES:**

*This is a very important part of the application. Please write your answers to the following questions on a separate sheet. Please type or print neatly in black ink.*

1. Briefly describe how and when you came to know Jesus Christ as your personal Savior and Lord and your subsequent spiritual growth. Cite factors that have aided in this process.
2. Comment briefly on your early life, interesting facts about your family background and your current relationship with your family. Include their reactions to your desire to participate in short-term missions.
3. Briefly describe what a person must do to spend eternity in heaven.
4. How are you currently involved with loving lost people and praying for them?
5. How have you grown spiritually in the last year?



**INTERNATIONAL  
MESSENGERS**

## Personal Character Background

We understand that the nature of the questions below is highly personal. Because you will be influencing others for or against Jesus Christ and serving the ministries of our career missionaries, it is our responsibility to take every precaution regarding areas that could in some way damage an effective ministry. We also want to be able to protect you while you are serving in these spiritually dark areas. All information will be held in strict confidence. Knowledge of past problems properly dealt with will not prevent acceptance; but discovery of dishonesty in any area may be grounds for immediate dismissal from the short-term program. Thank you for your transparency with us.

### During the last three years . . .

- Yes  No 1. Have you at any time used any controlled substances (drugs)?
- Yes  No 2. Have you been intoxicated from alcohol consumption?
- Yes  No 3. Do you need to use tobacco?
- Yes  No 4. Have you been in trouble with law enforcement officials or school authorities?
- Yes  No 5. Have you been involved with the occult or a sect?
- Yes  No 6. Have you fallen in areas of immorality?
- Yes  No 7. Have you had serious difficulties relating to your spouse, parents, or other family members?
- Yes  No 8. Are there other personal struggles that we should know about that might affect you under stress or lack of sleep?

If you answered yes to any of the above—or if there were occurrences *prior* to the last three years which you feel we should know about—please explain when each took place, how they were resolved, and what God taught you. Use additional paper if need be.

If responding to any of the above has highlighted unresolved areas, we encourage you to get started in an accountability relationship with a close friend in Christ, trusted pastor, or counselor.



## Statement of Faith and Mission Purpose

*We ask that you agree with the following Statement of Faith and Mission Purpose. Please read it carefully and sign at the bottom.*

### **STATEMENT OF FAITH**

1. **WE BELIEVE** the Scriptures, both Old and New Testaments, to be the inspired Word of God, without error in the original writing, the complete revelation of His will for the salvation of men and the Divine and final authority for Christian faith and life.
2. **WE BELIEVE** in One God, Creator of all things, infinitely perfect and eternally existing in three persons. Father, Son and Holy Spirit, having precisely the same nature and worthy of equal worship and obedience.
3. **WE BELIEVE** that Jesus Christ is true God and true man. Having been conceived of the Holy Spirit, and born of the virgin Mary, he lived a sinless life and died on the cross as a substitutional sacrifice for our sins. He arose bodily from the dead, and ascended into heaven, where He continues His High Priestly ministry at the right hand of the throne of God.
4. **WE BELIEVE** the ministry of the Holy Spirit is to glorify the Lord Jesus Christ, convict men, regenerate the believing sinner, indwell, guide, instruct and empower the believer for godly living and service.
5. **WE BELIEVE** that man was created in the image of God but fell into sin through Adam and is therefore totally depraved, and only through regeneration by the Holy Spirit can salvation and spiritual life be obtained.
6. **WE BELIEVE** that the shed blood of Jesus Christ and His resurrection provide the only ground for justification and salvation for all who believe, and only those who receive Jesus Christ are born of the Holy Spirit, and thus become children of God.
7. **WE BELIEVE** that water baptism and the Lord's Supper are ordinances to be observed by the Church during the present age. They are, however, not to be regarded as means of salvation.
8. **WE BELIEVE** that the true Church is composed of all who through personal faith in Jesus Christ have been regenerated by the Holy Spirit and are united together as the body of Christ of which He is the Head.
9. **WE BELIEVE** in the personal pre-millennial and imminent coming of our Lord Jesus Christ and that this "Blessed Hope" has a vital bearing on the personal life and service of the believer.
10. **WE BELIEVE** the destiny for the believer is to be present with the Lord and for the unbeliever is to be separated from the presence of the Lord in everlasting punishment.
11. **WE BELIEVE** the great evangelistic and missionary commission given by Jesus Christ to the disciples and to the continuing church is that of making Christ known throughout the world by word and example and bringing to maturity those who believe in Him through instruction from the Word.

### **STATEMENT OF MISSION PURPOSE**

International Messengers exists to glorify God through making disciples of Jesus Christ and incorporating them into congregations with the same purpose.

*I have read the above STATEMENT OF FAITH AND MISSION PURPOSE and am in agreement with both.*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



## ***SPIRITUAL GIFTS POLICY***

### **TONGUES**

How we pray in private is our own individual concern. However, when any public exercise is contemplated, the gift of tongues must be governed by the Biblical limitations. Those serving with IM should not advocate the gift of tongues as a second blessing that signals a higher level of sanctification than others who do not possess the gift, nor should they teach that speaking in tongues is a sign of true salvation. Furthermore, a heightened level of deference and willingness to consider others is vital within IM's diverse community. We ask that every effort be taken to maintain unity.

### **PROPHECY**

While we may differ on the nature of the gift of prophecy in the New Testament, we are all agreed on the working of God's Spirit to lead us forward and bring us to a common mind. We, therefore, ask short-term participants and career staff members to refrain from phraseology that claims direct revelation and to substitute such wording as, "I believe that what God is saying to us in this situation is. . ." We may differ in our convictions about the nature of our utterance, but by using inoffensive wording, we can remain true to our convictions and maintain our fellowship. Prophecy should be carefully weighed according to what is said by the Scriptures (I Corinthians 14:29).

### **WORD OF WISDOM/WORD OF KNOWLEDGE**

Corresponding expressions for "word of wisdom"/"word of knowledge" have been present for many years within evangelicalism. Participants and staff members are expected to respect each other's views and not to speak in a way that claims direct revelation on a level with Scripture, whatever the person's own feelings about their utterance (Rev. 22:18-19).

### **TEACHING ON SPIRITUAL GIFTS**

In the interest of unity, we ask our staff members and participants, when teaching about spiritual gifts, not to teach their particular understanding of this topic as the only admissible view, thus offending fellow workers.

### **AGREEMENT WITH POLICY**

*As this statement of policy is integral to the unity of the mission, I hereby agree to abide by the practices of this policy during the time I am serving with International Messengers.*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



**INTERNATIONAL  
MESSENGERS**

Camp Code: Office Use

## Health Insurance/Emergency Contact Information

NAME \_\_\_\_\_ DATE \_\_\_\_\_

HEALTH INSURANCE COMPANY NAME: \_\_\_\_\_

POLICY HOLDER'S NAME: \_\_\_\_\_

POLICY NUMBER: \_\_\_\_\_

[ ] ***I DO NOT CURRENTLY HAVE HEALTH INSURANCE.***

I have had all the recommended childhood vaccinations Yes [ ] No [ ]

None [ ] \_\_\_\_\_  
Allergies or medical conditions.

None [ ] \_\_\_\_\_  
Medications being taken or have been taken in the past month.

None [ ] \_\_\_\_\_  
Food restrictions.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### IN CASE OF EMERGENCY, NOTIFY:

Name: _____	Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____
Work Phone: _____	Work Phone: _____
Relationship: _____	Relationship: _____

(The information on this form will be shared with IM Staff and Team Leaders)



**INTERNATIONAL  
MESSENGERS**

Camp Code: Office Use

## Liability Release

1. In consideration for being accepted and allowed to participate in this conference/project and activities associated with its program and location, I personally assume responsibility for my actions, and release International Messengers (hereafter IM), its Trustees, employees and agents from loss, injury or damage to myself or my property; provided that nothing contained herein shall excuse IM, its Trustees, employees or agents from responsibility to act with reasonable care for the safety of myself or my property.
2. I give permission to IM to share my application information with IM staff and team leaders.
3. I give permission to IM to be photographed, recorded, and/or video taped and to allow this material to be used for publicity.
4. I give permission to IM to obtain medical assistance in the event of an emergency. This permission will include the administration of medicines, surgical treatment, X-ray examination or hospitalization as might be ordered by a licensed medical doctor. I release and discharge IM, its Trustees, employees, and agents from any liability for any first aid rendered or treatment performed pursuant to this consent.
5. I understand that participation in this conference/project may involve the risk of hostage taking or extortion. I release and discharge IM, its Trustees, employees, and agents from any and all liability should I be taken hostage. I further release and discharge IM, its Trustees, employees and agents from any and all liability for failure or refusal to comply with any demand or demands, including the payment of ransom or other extortion, issued through the use of hostage taking or extortion.
6. If I am under age 18 (if you are, please check here ● ), I state that I am a mature minor (of college age and living away from parent/guardian) and have the capacity to consent to the terms of this Release.

\*For persons under the age of 18 (19 in Alabama) and not living away from parent/guardian:

I, the undersigned parent or legal guardian of the above person, consent to the below named person's participation in this activity and agree to the terms of this release.

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Print Name of Parent or Guardian**

\_\_\_\_\_  
**Date**

7. Should any dispute or controversy arise, I agree to seek resolution according to the Rules of Procedure of the Institute for Christian Conciliation, 1537 Avenue D, Suite 352, Billings, MT 59102. I certify that I am competent to sign this Release, and have done so voluntarily.

\_\_\_\_\_  
**Signature of participant**

\_\_\_\_\_  
**Print name of participant**

\_\_\_\_\_  
**Date**

# TRAVEL PREFERENCE FORM

IM requests that you arrange your own travel unless you are traveling to Egypt, East Germany, Jordan, Lebanon or Uganda. If you are traveling to any of these countries, please read and fill out this form COMPLETELY. **If you will be arranging your own travel, please fill out and complete only *these entries*\* and send with application.** We recommend our travel agency, Raptim, for your travel arrangements (Attn: Claudia Ford; ServeTeam2.us@raptim.org, 719-385-3302) and offer assistance upon request.

*\$1000 per person is needed in the IM office prior to purchasing your airline ticket.  
If you personally purchased your ticket, IM will reimburse you—upon request—the amount of support raised up to the cost of your tickets. There is no administration fee for this service.*

Preferred departure airport(s): \_\_\_\_\_

Ground travel time to airport(s): \_\_\_\_\_

Frequent Flyer #(s): \_\_\_\_\_ Airline(s): \_\_\_\_\_

Seating preference (*circle*): aisle middle window (If you have other seating needs, please comment below)

Airline food restrictions (*ie: gluten or dairy free, vegan, etc*): \_\_\_\_\_

Additional comments: \_\_\_\_\_

**\*Check box if:** (does not apply to those traveling to Egypt, East Germany, Jordan, Lebanon or Uganda)

- I will be arranging and purchasing tickets on my own. **Before purchasing tickets**, please contact Hannah (hannah@im-usa.org) with your travel plans.
- I may want to travel before or after the camp on my own. (*Please contact IM office to ensure there are no travel security concerns with your personal travel*)
- I request IM to purchase Emergency Medical Insurance for my personal travel (*see note below for more information*).

(Specify dates and cities for additional travel) \_\_\_\_\_

**Emergency Medical Insurance:** International Messengers secures **emergency medical insurance** for your *IM trip dates*. The \$20 cost is included in your ministry cost and the paperwork for this insurance will be taken care of by office staff. If you already have insurance coverage for outside of the US, the IM coverage will be secondary. We *do not* secure insurance for any additional personal travel you may do, either ahead of or after your IM trip dates. If you are interested in obtaining an insurance quote for your personal travel, please contact Hannah.

**STEP Program:** If you are traveling to Egypt, East Germany, Jordan, Lebanon or Uganda, IM will be registering you on Smart Traveler Enrollment Program ([step.state.gov](http://step.state.gov)). The information will be sent to the nearest U.S. Embassy or Consulate in the country you are traveling to, in case of an emergency and evacuation is needed. **All other travelers are responsible to register their trip on the STEP website.**

**Questions?** Please contact Hannah: 800-243-6763 or hannah@im-usa.org

International Messengers  
PO Box 618 • Clear Lake, IA 50428-0618  
641-357-6700 • [www.im-usa.org](http://www.im-usa.org)



**INTERNATIONAL  
MESSENGERS**





**International Messengers  
Summer Shirt Order Form  
MAY - SEPTEMBER**

Please return form to IM  
or email size and color to:  
office@im-usa.org

Every International Messengers Summer Team Member will receive a **free** T-shirt or long sleeve T-shirt. **Please CIRCLE the SIZE and COLOR you would like.** (Note: We are in the process of changing IM's shirt order form, shirt design and color selection. These changes will begin fall of 2017)

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**T-SHIRT \$13.00** (GILDAN 100% Heavyweight Cotton 6.1 oz) Adult sizes: **S M L XL 2XL 3XL 4XL**  
 Royal Blue - Berry - Sport Gray Youth sizes: **XS=2/4 S=6/8 M=10/12 L=14/16 XL=18/20**

**LONG-SLEEVE T-SHIRT \$14.00** (GILDAN 100% Heavyweight Cotton 6.1 oz) Adult sizes: **S M L XL 2XL 3XL 4XL**  
 Royal Blue - Maroon - Sport Gray Youth sizes: **XS=2/4 S=6/8 M=10/12 L=14/16**

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**CREW NECK SWEATSHIRT \$22.00** or **HOODED PULLOVER SWEATSHIRT \$26.00** (JERZEES 9oz Heavyweight 50/50)  
**S M L XL 2XL 3XL 4XL**  
 Ash<sup>4,Y</sup> - Black<sup>4,Y</sup> - Forest Green<sup>3,Y</sup> - Maroon<sup>3,Y</sup> - Navy<sup>4,Y</sup> - Purple<sup>Y</sup> - Red<sup>4,Y</sup> - Royal Blue<sup>4,Y</sup> - Sport Gray<sup>4,Y</sup> - White<sup>3,Y</sup>  
 (Youth sizes<sup>Y</sup> for sweatshirts: **XS=2/4 S=6/8 M=10/12 L=14/16**)

**SHORT-SLEEVE POLO SHIRT w/Embroidered Logo \$23.00** (6.1 oz Cotton Jersey Knit) **S M L XL 2XL**  
 Ash - Black - Forest Green - Maroon - Navy - Red - Royal - Sport Gray - White

**SHORT-SLEEVE SHIRT w/Embroidered Logo \$27.00** (Mens and Womens sizes) **S M L XL 2XL 3XL**  
 Denim (100% Cotton): Faded Blue  
 Twill (55/45 Cotton/Poly): Black - Brown - Forest Green - Khaki - Navy

**LONG-SLEEVE SHIRT w/Embroidered Logo \$31.00** (Mens and Womens sizes) **S M L XL 2XL 3XL**  
 Denim (100% Cotton): Faded Blue<sup>MT</sup> **Mens tall = <sup>MT</sup>, Womens tall = <sup>WT</sup>**  
 Twill (55/45 Cotton/Poly): Black<sup>M/WT</sup> - Brown<sup>MT</sup> - Forest Green<sup>MT</sup> - Khaki<sup>M/WT</sup> - Navy<sup>M/WT</sup> **LT XLT 2XLT 3XLT**

**FULL-ZIP FLEECE JACKET** or **HALF-ZIP PULLOVER JACKET w/Embroidered Logo \$40.00** (100% Polyester Fleece)  
 Red - Black - Charcoal - Navy - Forest Green **S M L XL 2XL**

If you would like to order additional items, please indicate size and color above and fill out the form below.  
**\*\*Items will be ordered if payment is received with order form, so please also include a check payable to International Messengers for the proper amount.**

ITEM (do not include free item here - circle free item above)	COLOR	SIZE		PRICE
			TOTAL	**

**NAME:** \_\_\_\_\_

**TEAM:** \_\_\_\_\_



<b>INTERPERSONAL RELATIONSHIPS:</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>D</b>
1. Listens well				
2. Communicates openly and honestly				
3. Relates appropriately to opposite sex				
4. Dresses modestly				
5. Cooperates with others, an effective team member				
6. Willingly accepts direction, correction and advice				
7. Relates well to Christians of different doctrinal positions				
8. Relates well to non-Christians				

**COMMENTS:**

1. What do you think are this applicant's greatest strengths, traits, qualities or characteristics that make this person a good applicant?
  
2. What do you think are the applicant's greatest weaknesses, possible problem areas or areas where further training is needed?
  
3. Are there any physical, emotional or mental limitations?
  
4. To your knowledge, has this person, within the last three years, been involved in any legal, discipline, moral or serious interpersonal problems or practiced any behavior you feel would be inappropriate for a cross-cultural missionary context? \_\_\_\_\_ If so, please explain:
  
5. Would you recommend acceptance of this applicant?
  - YES, definitely.
  - YES, with reservation as suggested by above comments.
  - NO, not until growth in the mentioned areas.
  - NO, I cannot recommend acceptance.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



<b>INTERPERSONAL RELATIONSHIPS:</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>D</b>
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