

# Outstretched Hands of Romania



## MISSION TRIP PROFILE

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

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

AGE: \_\_\_\_\_ MALE/FEMALE \_\_\_\_\_

MARRIED \_\_\_\_\_ SINGLE \_\_\_\_\_ (PLEASE CHECK ONE)

PERSON TO CONTACT IN CASE OF EMERGENCY: \_\_\_\_\_

**\*\*PLEASE ANSWER ALL QUESTIONS FULLY!** IF SUBMITTING THIS FORM BY HARDCOPY, PLEASE USE THE BACK SIDE OF EACH SHEET TO ANSWER IN MORE DETAIL, IF NEEDED.

### **MEDICAL INFORMATION:** (PLEASE BE SPECIFIC-YOUR INFORMATION WILL BE TREATED WITH 100% CONFIDENTIALITY)

- DO YOU HAVE ANY ONGOING MEDICAL PROBLEMS? YES/NO IF YES, WHAT ARE THEY?
- DO YOU HAVE ANY ALLERGIES? YES/NO IF YES, WHAT ARE THEY?
- ARE THERE ANY MEDICAL PRECAUTIONS THAT YOU WILL NEED TO OBSERVE WHILE SERVING IN ROMANIA? PLEASE LIST.
- ARE THERE BEHAVIORAL ISSUES THAT COULD OR WILL AFFECT YOUR BEHAVIOR WHILE IN ROMANIA? (DEPRESSION, ANXIETY, ADD OR ADHD, ETC.)
- DO YOU SMOKE CIGARETTES?
- WILL YOU BE TAKING MEDICATION WHILE IN ROMANIA? YES/NO IF YES, PLEASE LIST.
  - PRESCRIPTION: \_\_\_\_\_
  - NON-PRESCRIPTION: \_\_\_\_\_

**INSURANCE INFORMATION:** (PLEASE PROVIDE NAME OF INSURANCE COMPANY AND POLICY NUMBER)

# SPIRITUAL HISTORY

- 1) IF YOU ARE A CHRISTIAN, WHEN DID THIS HAPPEN?
- 2) WERE THERE ANY SPECIFIC CIRCUMSTANCES THAT LED TO YOU BECOMING A CHRISTIAN?
- 3) NAME SOME WAYS IN WHICH YOUR LIFE HAS BEEN TRANSFORMED BY JESUS?
- 4) HAVE YOU EVER BEEN ON A MISSION TRIP BEFORE? YES/NO. IF YES, WHEN AND WHERE?

# PERSONAL INFORMATION

- 1) WHICH OF THE FOLLOWING HAVE YOU DONE? (PLEASE COMMENT ON OR CIRCLE WHAT IS APPLICABLE).

PREACHING

TEACHING

GIVEN TESTIMONY IN FRONT OF OTHERS

SINGING

DRAMA

MINISTRY TO CHILDREN / YOUTH

CARPENTRY/CONSTRUCTION

PRAYING WITH STRANGERS OR NEW CONVERTS

**OTHER WAYS OF SERVING:** (PLEASE LIST)

- 2) IS THERE ANYTHING IN THE LIST ABOVE THAT YOU WOULD **NOT** BE WILLING TO DO ON THIS MISSION TRIP? IF SO, WHAT AND WHY?
- 3) HOW DO YOU PLAN TO RAISE MONEY FOR THIS TRIP?

4) WHY DO YOU WANT TO GO ON A MISSION TRIP TO ROMANIA?

5) DO YOU HAVE A CURRENT PASSPORT? \_\_\_\_\_ (CHECK THE EXPIRATION DATE)

6) OCCUPATION? \_\_\_\_\_

7) JOB SKILLS? \_\_\_\_\_

\_\_\_\_\_

8) HOBBIES? \_\_\_\_\_

\_\_\_\_\_

9) SPIRITUAL GIFTING? \_\_\_\_\_

\_\_\_\_\_

10) TALENTS? \_\_\_\_\_

\_\_\_\_\_

11) WHAT ARE SOME THINGS YOU WOULD MOST WANT TO DO WHILE IN ROMANIA?

\_\_\_\_\_

\_\_\_\_\_

PLEASE COMPLETE ALL QUESTIONS AND RETURN THIS FORM TO BRAD HAYES @

[HAYESROMANIA@JUNO.COM](mailto:HAYESROMANIA@JUNO.COM)

NO LATER THAN \_\_\_\_\_ THANK YOU!