

Application for Companion Diocese Mission Team, November 2009 Trip to Lui, Sudan

All prospective mission-trip participants must complete an application and have someone who knows them well submit the reference form that is page 4-5 of this application. Please type or print legibly and answer all questions fully. A mission leader or member of the diocesan staff or companion diocese committee may contact the applicant and reference by phone or email as part of the decision-making process.

Those selected for the November 2009 trip (November 22 through December 4) to Lui will have to complete additional forms, including medical and contact information and informed consent, and attend at least one and probably two preparatory meetings in the St. Louis area.

The estimated cost of the trip is \$3000. Missioners can pay the cost themselves but are encouraged to involve their congregations, friends, and families in the mission of the Diocese of Missouri. Those selected will receive more information on fundraising.

Questions about the trip or the application process? Feel free to contact the trip leader, Debbie Smith – dlmsmith@gmail.com or 314-489-7386

Email your completed application to **bfelice@diocesemo.org** or mail your completed form to
Beth Felice
Episcopal Diocese of Missouri
Offices of the Bishop
1210 Locust Street, 3rd Flr.
St. Louis, MO 63103

Applications and references are due in the Diocesan office by **August 24, 2009**. You will be notified by email by September 4 whether or not you have been selected for the November 2009 team.

Name: _____
Full name, as it appears or would appear on your passport

Complete mailing address: _____

Phone numbers: Home: _____ Work: _____ Cell: _____

Email: _____

Date of birth: _____ Gender: _____ Marital status: _____

Spouse/Partner's name: _____

Children/ages: _____

Citizenship: _____ U.S. citizen (or Green Card holder)
_____ Other (specify: _____)

Do you have a passport? _____ Yes _____ No

Passport No.: _____ Passport Expiration Date: _____

CHURCH MEMBERSHIP

[For lay applicants] I am a member of this parish/city:

Name and address of parish: _____

Active? _____ Yes _____ No How long a member?

[For clergy applicants] I am canonically resident in the Diocese of: _____

HEALTH INFORMATION (A MORE COMPLETE MEDICAL INFORMATION FORM WILL BE REQUIRED OF THOSE SELECTED FOR THE MISSION TEAM.)

How would you describe your health?

_____ Excellent (almost always well)

_____ Good (minor illnesses)

_____ Frail (frequently ill)

Explain health as needed:

MISSION

Why do you want to go to Lui?

What is your current ministry in your congregation, the diocese, and/or the community?

What previous experience of mission work/travel do you have?

What skills or experience do you have in the area of cross-cultural relationships?

What skill or skills do you have that would be helpful on this particular mission or to Lui in general?

Specific skills you possess:

_____ Administration

_____ Agriculture

_____ Communications

_____ Computers/Technology

_____ Construction

_____ Education – specify level or subject:

_____ Engineering – specify type:

_____ Finance

_____ Health care – specify area of expertise:

_____ Mechanical Aptitude

_____ Ministry/Bible study

_____ Service industry – specify:

_____ Other:

What do you think will be the biggest challenge for you personally in traveling to Sudan?

What are your hopes for this trip?

Are you willing to help find financial support for your participation and for the mission itself?

_____ Yes _____ No

If your application is approved, do you agree to participate fully in the life of the team and comply with the directives of the team leaders? (This is a crucial element for the success of the trip, and for the safety of all team members.)

_____ Yes _____ No

Signature

Date

Applicants who file this application electronically and are accepted for the mission will be asked to sign a hard copy of the application at the first preparatory meeting.

Thank you, and may God richly bless you and your service for God.

REFERENCE FORM FOR SHORT-TERM MISSION APPLICANT

Applicant's name: _____

You have been asked to fill out this reference form for the above-named applicant for a short-term mission trip. Your honest opinions will be of the greatest help to your friend for whom you are serving as a reference. Your prayerful, thoughtful and candid responses to the following questions will best enable us to assist her/him to make the most of this significant opportunity for service to God. Please complete this form and email it to **bfelice@diocesemo.org** or mail it to:

Beth Felice
Episcopal Diocese of Missouri
Offices of the Bishop
1210 Locust Street, 3rd Floor
St. Louis, MO 63103

Your name:

Your address:

Phone:

E-mail:

All information that you provide will be kept in strict confidence.

What is your relationship to the applicant?

For how long and in what setting(s) have you known the applicant?

How would you describe his/her general temperament and ability to relate to others with their own culture?

How do you think he/she would relate to others in an unfamiliar cross-cultural setting?

What do you see as his/her outstanding personal strengths?

Are there areas in which you see opportunity for growth?

How would you assess his/her potential for significant cross-cultural service?

Is there anything else you would like to share with us?

Thank you, and may God richly bless you and your service for God.
Your reference must be received in the Diocesan office by August 24, 2009