



Mission Application/Internship

(For married couples, each should fill out a separate application.)

Personal Information:

Name _____ Date of Birth _____

Address _____ City _____

State _____ Zip _____

Country _____ Phone _____ Email _____

Citizenship _____

Education:

Schools Attended	Course/Major	Date(s)	Grad/Degree
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Employment experience:

Occupation/Position	Name of Employer	Address/Phone Number	Date(s)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References:

Enclosed with this application are three reference forms (pastor, employer/teacher, and a Christian friend that knows you well). Provide a stamped return envelope addressed to SOAR for each person to return their completed reference form.

1. Pastor's Name _____ Phone: _____

Church _____ Denomination _____

2. Employer/Teacher Name _____ Phone: _____

3. Friend Name _____ Phone: _____



Please explain, on a separate sheet of paper, your salvation experience. Include the following information:

1. How and when you came to know Jesus Christ as Lord and Savior
2. The changes that occurred in your life following your conversion
3. The evidence in your life now of a personal growing relationship with God

Have you ever been accused, charged or convicted of a crime? _____

If yes, explain: _____

Have you ever been denied a passport or visa? _____

If yes, explain: _____

Do you use (or have you used) tobacco, alcohol or illegal drugs? _____

If yes, explain: _____

How important is the authority of Scripture in ordering your life?

What are your feelings about submission to authority?

Do you adhere to speaking in tongues as necessary evidence of salvation? Yes ____ No ____

Comment _____

Please explain your beliefs about speaking in tongues and healing _____



List any gifts, callings, training, education, etc., that have prepared you for working in this ministry.

Is there any other information that we should know about you?

I would like to full fill my internship during the following dates: Beginning _____ ending _____ .

Is this internship needed for college credits? Yes: _____ No: _____
If yes, please explain: _____

I attest that to the best of my knowledge, all the information I am submitting is true and complete. I have also read and agree with SOAR International Ministries 'doctrinal statement. All applicants must complete a background check prior to start date.

Applicant's Signature

Date

Applicant's Checklist:

- ___ Mission Application completed and signed
- ___ References (3) sent out with return envelopes
- ___ Picture
- ___ Personal Covenant
- ___ Personal Testimony
- ___ Doctrinal Statement