



Short-Term Mission Project Personal Profile

(Please fill out form completely and submit to FBC Equipping Ministry office)

Dear FBC member,

I'm excited that you are prayerfully considering joining one of our church's mission projects. Please fill out this form completely. If you have any questions during this process, don't hesitate to call me at 453-9001. I'm praying for you as you seek to obey the Great Commission of our Lord Jesus.

Until all hear the good news...

Craig Mintz
Associate Pastor: Equipping

Personal Information

Date _____

Name (on passport) _____

Address _____

City, ST, Zip _____

Home Phone _____

Cell Phone _____

Work Phone _____

Date of Birth _____

Email Address _____

Passport Number _____

Date of Issue _____

Project Description

Mission Project Title _____ Dates _____

Please describe your understanding of the ministry you will have on the field:

Previous Missions Experience

List any foreign languages you speak and describe your proficiency in each language:

Describe any gifts, skills, talents, or experiences that you believe will be helpful on this project:

Please list any previous missions experience you have:

Country	Sponsoring Church or Mission Organization	Dates	Ministry
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>

Trip Cost

Each participant will responsible for paying the cost of their trip by specified deadlines. Partial scholarships may be available upon request, but cannot be guaranteed.

Ministry Involvement

Are you a member of FBC of Sevierville? _____

Are you a member of a Life Group (Sunday School)? _____

Please list all of the ministries you are currently involved in including ministries outside of FBC:

Ministry Name	Length of Service	Leadership Positions
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

Medical Information

Please describe any allergies you have: _____

Do you have any medical or physical issues that might limit your ability to serve on this trip?

_____ If Yes, please explain: _____

*Please be aware that many mission trips require a great deal of walking and physical exertion – far more than many Americans are used to on a daily basis.

Supplemental Insurance Information

(This policy is provided on all out-of-country mission trips)

Person you would like to be the beneficiary on your supplemental insurance

Name _____

Relationship _____

Emergency Information

In case of emergency, please notify...

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____

Personal Testimony

Please provide a brief description of your walk with Jesus Christ (including your salvation experience, what God has done in your life since and what He is doing in your life now):

Please provide a brief description of why you believe God has led you to participate in this project:

Personal References

Please provide two personal references. One should be a pastor or ministry leader that knows your gifts, skills, abilities and ministry experiences.

Name _____
Relationship _____
Address _____
City, ST, Zip _____
Phone _____
Alternate Phone _____

Name _____
Relationship _____
Address _____
City, ST, Zip _____
Phone _____
Alternate Phone _____

Mission Project Covenant

Believing God has led me to participate in this mission project, I will:

- Participate in required training before the project
- Enlist at least 5 prayer partners for this trip and help them know how to pray for us
- Follow the leadership of the Equipping Ministry staff and project team leaders
- Conduct myself in a manner worthy of the gospel of Jesus Christ
- I will attend all meetings related to this mission project

Signature of Participant

Date

First Baptist Church, 317 Parkway, Sevierville, TN 37862, 865-453-9001, www.fbcsev.org