



# del corazón de Jesucristo

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## REQUIRED DOCUMENT: APPLICATION FOR LONG or SHORT-TERM MISSIONS

Please fill out the application form completely and mail it to *del Corazon de Jesucristo*. The form must be completed and received prior to your trip. You will be notified after your application has been reviewed. Del Corazon de Jesucristo has the right to refuse acceptance of any applicant. Upon request, the refusal will be discussed with the applicant. All applicants must be 18 years or older.

**MISSION TRIP DATES** \_\_\_\_\_

**(Please be specific)**

### GENERAL INFORMATION

Name as it appears in your passport

\_\_\_\_\_

Address \_\_\_\_\_

Street

City

State

Zip

Phone

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male  Female

Email \_\_\_\_\_ Marital Status \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

### PASSPORT INFORMATION (You will be required to bring a photocopy of your passport.)

Name As It Appears On Your Passport \_\_\_\_\_

Passport Number \_\_\_\_\_ Issued by what country \_\_\_\_\_

Expiration Date \_\_\_\_\_ Citizenship \_\_\_\_\_

**HEALTH INFORMATION**

Name of Medical Insurance Carrier \_\_\_\_\_  
(You will be required to bring a photocopy of your insurance card (front and back).)

Does your health insurance cover you overseas? \_\_\_\_\_

Describe your present health and fitness \_\_\_\_\_

Health Problems or Conditions \_\_\_\_\_

Allergies or Chronic Illnesses \_\_\_\_\_

Current medications presently being taken (please explain) \_\_\_\_\_

\_\_\_\_\_

Dates of Last Shots:

Tetanus \_\_\_\_\_ Typhoid \_\_\_\_\_ Hepatitis A \_\_\_\_\_

Psychiatric care or treatment \_\_\_\_\_

Major illnesses within the last 5 years \_\_\_\_\_

Other medical conditions or disabilities \_\_\_\_\_

(A doctor's reference or exam may be required)

**SPIRITUAL INFORMATION**

Name of your home church \_\_\_\_\_ # of years attended \_\_\_\_\_

Pastor \_\_\_\_\_ Telephone \_\_\_\_\_

Do you serve as a leader or volunteer in any ministry at your church or outside the church? Explain.

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

What are your spiritual gifts? \_\_\_\_\_

References: (One of your references must be a pastor or leader of the church you are currently attending)

Please include a mailing address and phone number

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

Describe how and when you became a Christian and your relationship with Christ.

Have you been water baptized? If yes, where and when? \_\_\_\_\_

Have you ever served on a mission trip or other cross-cultural experience? Explain and provide the name of the church or organization(s) involved.

Please write a brief statement of your personal belief regarding:

God \_\_\_\_\_  
\_\_\_\_\_

Jesus \_\_\_\_\_  
\_\_\_\_\_

Holy Spirit \_\_\_\_\_  
\_\_\_\_\_

Salvation \_\_\_\_\_  
\_\_\_\_\_

Baptism \_\_\_\_\_  
\_\_\_\_\_

**PERSONAL INFORMATION**

How did you hear about Del Corazon de Jesucristo?

Why do you want to go on this trip?

Explain how God will be using you to share the Gospel of Christ and how you will be serving alongside Del Corazon de Jesucristo.

How is God preparing you for this trip?

Please list any talents that you have. \_\_\_\_\_  
\_\_\_\_\_

What foreign languages do you speak? \_\_\_\_\_

What do you see as your strongest character quality and why? \_\_\_\_\_  
\_\_\_\_\_

What do you see as your weakest character quality and why? \_\_\_\_\_  
\_\_\_\_\_

Describe your personality \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you been or are you currently involved with any of the following within the past year?

alcohol \_\_\_\_\_ criminal activity \_\_\_\_\_ illegal drugs \_\_\_\_\_ tobacco \_\_\_\_\_ cult or the occult \_\_\_\_\_

Have you ever been convicted of a crime? Explain \_\_\_\_\_

Significant events in your life in the past 2 years \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are you doing now to grow in your faith? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Email Address \_\_\_\_\_ Phone \_\_\_\_\_

**AGREEMENT TO COMMITMENT**

Del Corazon de Jesucristo requires that all participants comply with the rules and regulations concerning conduct, dress, Christian lifestyle and cultural sensitivity. These are explained in the participant information packet. Failure to comply with these policies is grounds for immediate dismissal. Del Corazon de Jesucristo is not liable in the event of sickness, personal injuries, accident, death, or terrorists acts. Del Corazon de Jesucristo is not liable for transportation, property damage, costs, and any other expenses beyond normal involvement.

I have voluntarily chosen to participate in this mission trip and to be involved in outreach to physical and spiritual needs. I will represent Christ and conduct myself in a manner worthy of the Lord and refrain from any behavior which may compromise my witness.

I am in good health and physically able to perform hard physical labor.

I may be required to obtain a doctor’s exam or prior written approval to participate on this mission trip. All medical expenses incurred will be the responsibility of the participant.

I have read and understand the above information, and the information that I have submitted is accurate and true.

Please confirm your intent to be bound by the above mentioned terms. By selecting “I accept” you are entering into a binding contract/agreement with Del Corazon.

- I accept
- I decline

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_