

Children of Peace International Statement of Interest in Mission Trip

*****If you plan to join the Spring Mission, (often in March),** please mail this application to:
COPI Spring Mission c/o Curtis and Raina Zeeh 2010 Tall Pines Way Sandy, UT 84092.

*****If you plan to join the Summer Mission, (often in late July),** please mail this application to:
COPI Summer Mission c/o binh rybacki 773 Johnson Ave. Loveland, CO 80537

You may send this application to copimission@gmail.com

Applicant's information will remain confidential

Today's Date:		Trip Applying For:			
Last Name:		First:	Middle:	Marital Status:	T-Shirt size
Birth Date:	Age:	Gender:	Place of Employment:	*Occupation:	
Home Street Address:		Home Phone:	Cell Phone:	Work Phone:	
City:		State:	Zip Code:	Email:	
Travel Document Information					
Do you have a passport? (circle) Yes No	Passport Number & Country:		Passport Expiration Date:	Citizenship:	

***You must submit your valid passport 3 months prior to departure for visa application and airfare reservation.**

*** We will need a copy of your State License to practice if we invite you to join the mission as one of our medical or dental profession.**

Questions:

Write your answers in the spaces provided. If additional space is needed, continue on another sheet of paper and attach it to this application. All information you provide will remain confidential but may be revealed in an emergency if medically necessary.

1. Have you ever traveled outside the USA? If so, where? _____

2. Have you ever been on a mission trip before? List mission trips: _____

3. How did you hear about Children of Peace International? _____

4. Do you have any special needs that could warrant special attention during a mission trip? Please describe: _____

5. Have you had any medical problems in the past six months? If yes, please explain: _____

6. List medications you are currently taking and what they are for: _____

7. Do you have any dietary limitations (such as: hypoglycemia, diabetes, etc.)? _____
8. Do you have any training/certification in any medical profession (i.e. MD, RN, EMT, PT, etc.)? If you plan to use this training or certification on the mission, you will be asked to provide a copy of your license in _____

9. What skills and/or experience do you have that might be helpful on this mission trip? (i.e. face painting, balloon art, clowning, hugging kids) _____

10. Do you know any foreign languages? If so, which ones? _____
 Rate yourself 1-5 with 1 being minimal and 5 being fluent in:
 Speaking? _____ Reading/writing? _____ Understanding? _____
11. Do you have any issues concerning Viet Nam, such as the war, the history? Please explain: _____

12. Why do you want to go on a mission to Viet Nam? _____

13. Group dynamics are a very important factor for the success of the mission. Are you (circle all that apply):
 a peacemaker a team player a problem-solver punctual
 a person who goes with the flow a person in need of private/quiet space
14. How do you handle unexpected events such as: change in schedule or plans, etc? _____

15. Is there any other information that we should know about (felony convictions, legal matters, etc.)? _____

16. Is your name listed on any sex offender registry in any state in the U.S.? _____

Applicant Agreement

The information I have provided is true and complete to the best of my knowledge and I authorize Children of Peace International to verify the authenticity of my statements with the appropriate authorities. In the event that I am accepted to be a participant in this mission trip, I commit to fulfilling the requirements and submit myself under the leadership and guidance of Children of Peace International's mission team leaders.

Signature

Date