

  
**Amor del Niño      Love the Child**  
**Volunteer Application Form**

*Please Print or Type*

**Legal Name** (as it appears on passport):

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Social Security: \_\_\_\_\_ Passport Number: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Passport exp Date: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Names and Ages of Children: \_\_\_\_\_

Have you been on a mission trip before: Yes      No      Where: \_\_\_\_\_

Church: \_\_\_\_\_ Church Phone: \_\_\_\_\_

Church Address: \_\_\_\_\_

How Long have you been involved in this church: \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Amor del Niño**  **Love the Child**  
**Volunteer Application Form**

**We Want to Get to Know You Better!**

**Please check and/or fill out all information that applies to your special Interests**

- Evangelism
- Construction
- Maintenance
- Health Care Professional
- Outreach Ministries
- Mime
- Clowning
- Puppets
- Other
- Technical and computers
- Musical Instructor
- Child Care Professional

**Are you proficient in Spanish?:**  Yes  No

**If Yes: How fluent?;** very fluent, good, fair, or a little.

**Your Story**

**Please tell us why you would like to go and what you could contribute to the team.**

  
**Amor del Niño      Love the Child**  
**Volunteer Application Form**

**General Attitude and Conduct**

If you plan visit Love The Child and Amor del Niño on a short term Mission trip, you must be willing to embrace the following attitudes and guidelines. Please check "yes" after each statement that you are willing to embrace and sign your initials next to it.

I will follow the decisions of those in leadership above me, including the leadership of my missionary host.

Yes, I agree Initials: \_\_\_\_\_

I will immerse myself in the local culture, as much as possible and refrain from expressing criticism of local cultures and congregations.

Yes, I agree Initials: \_\_\_\_\_

I will confirm joyfully to the standards of the local body of believers, even if their standards are stricter than my own, including areas of dress such as dress length, wearing jeans, shorts, etc. (i.e. do not cause my brother to fall, Romans 14)

Yes, I agree Initials: \_\_\_\_\_

I realize that I may live in pioneer conditions including the possibility of different food and small quarters while on this international ministry trip.

Yes, I agree Initials: \_\_\_\_\_

I will not use illegal drugs during this ministry trip.

Yes, I agree Initials: \_\_\_\_\_

I realize that any available sightseeing and shopping will be permitted only if it coincides with the team's main purpose, but could be cancelled if not deemed convenient for travel, time, or if it hinders the flow of our ministry trip.

Yes, I agree Initials: \_\_\_\_\_

I have read all the above statements under "General Attitude & Conduct" and agree to abide by these guidelines at all times during the trip that I am applying for.

Yes, I agree Initials: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your signature: \_\_\_\_\_

Date: \_\_\_\_\_


  
**Amor del Niño      Love the Child**
  
**Volunteer Application Form**

**Pastor's Recommendation**

**Please Mail, Fax or scan and attach to:**

**LOVE THE CHILD PO BOX 1744 KELLER TX 76244**  
**817-741-2104**  
**sosbornltc@gmail.com**

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Position of Leadership: **Senior**       **Associate**       **Youth**       **Elder**

Church: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How Long have you know applicant?: \_\_\_\_\_

How well do you know him/her:

By Face Only       Casually       Fairly Well       Very Well

Name of Applicant: \_\_\_\_\_ Applicant's Phone Number: \_\_\_\_\_

**Circle a number from 1-5 which would best reflect how the applicant reflects the following character traits, with 5 representing "excellent" and 1 representing "poor".**

Servant hood 1 2 3 4 5      Dependability 1 2 3 4 5      Spiritual Life 1 2 3 4 5

Respect for Authority 1 2 3 4 5      Maturity 1 2 3 4 5      Leadership Ability 1 2 3 4 5

**Is the applicant active in his/her Church:**

Yes       No

**To your knowledge, has the applicant had a salvation experience:**

Yes       No

**Do you have any reason to lack confidence in this applicant:**

Yes       No

**On the basis of the above information the applicant is:**

Strongly Recommended

Recommended

Recommended with Reservation

Not Recommended

**We would appreciate any additional comments you might have concerning the applicant. (Write on back of form or separate sheet.)**