Global Impact Resources - Missionary Application



Full name		R E S 🗓 V Date of Birth:	R C E S
		Separated	
Spouse's name	Date of Birth:	Marriage Date:///	
CURRENT MAILING AD	DDRESS If US not permanent address, provide	contact while here?	
Street			
City, State, ZIP			
Telephone ()	Cell Phone ()		
E-Mail	How often do you check it?		
	ADER REFERENCE (reference form attached	to application)	
Name			
Phone	Email		
SENDING MINISTRY A			
Church name	S	Senior Pastor	
Street	City, State, ZIP		
website:		Telephone ()	
RECEIVING MINISTRY	ADDRESS		
Ministry/Church name	1	Director/Pastor	
Street		City, State, ZIP	
website:	(Telephone ()	
	TINFORMATION (Please provide 2 contacts)	Telephone	
Name	Relationship to applicant	() Telephone	
Name	Relationship to applicant	()	
MINISTERIAL STATUS			
	ensed, or ordained minister?		
•			
If yes, what organization/chur	rch were you commissioned, licensed, or ordain	ed? When?	

CITIZENSHIP, VISA, & PASSPORT Country of citizenship: ______ Do you hold US permanent resident status? See Yes See No Do you currently have a US visa? Yes No Type and expiration date of visa: _____ Organization that issued visa: Will your spouse also be working in the ministry? Yes No If yes, country of citizenship: _____ Do you have a passport? **Yes **No If Yes, please answer the following: Passport number______Date of issue _____Place of issue **HEALTH INFORMATION** Are you, your spouse, children and/or dependents in good health? Yes No If no, please explain: Are you covered by any medical insurance policy? Company Policy number Phone: () PARTNERSHIP DEVELOPMENT Will you be depending upon any supplemental income in addition to your partnership team? Syes No If yes, please describe: How much of your income will come through a partnership team: 100%, 75%, 50% or less than 50%?_____ Please attach a personal photograph, supporting documentments, and reference form with your application: WHERE TO SEND APPLICATION **Global Impact Resources** PO Box 3012, Greenville, NC 27836 Tel/Fax: (252) 752-8875 or scan and email to info@globalimpactresources.org UPON APPROVAL, APPLICANT WILL BE CONTACTED VIA EMAI L AND GIVEN FURTHER INFORMATION. FOR OFFICE USE ONLY

Date Received

Date Approved

Ministry Location

APPLICATION QUESTIONAIRE

1.	Please write a brief statement of how and when Jesus became the Lord of your life. (you may use a separate sheet if needed)		
2.	When were you called onto the mission field and how?		
3.	Are you currently a part of a church affiliation, denomination, or movement? List their name, how long and description of your involvement? (please attach a copy of their Statement of faith)		
4.	Why do you want to participate in Global Impact Resources?		
5.	Which ministry opportunities are you pursuing? (check appropriate boxes) New church plant Strengthen existing church Orphanage center Medical missions Building project, construction Other (please specify)		
6.	What is your current involvement in ministry work, if any? Experience in evangelism, discipleship, cross-culture, missions, leadership in church, prayer group, worship, counseling, teaching, etc?		
7.	Briefly describe your ministry responsibilities once you complete your partnership team.		
8.	List your skills, special talents, musical abilities, and other ministry experience.		
9.	In your opinion, what are your strengths and weaknesses?		

Release and Assumption of Risk Agreement		
I,, will be participating in this missions work is entirely voluntary.	missions work through Global Impact Resources. My participation in	
loss, and destruction) arising from my travel and part which may include but are not limited to the failure to	cy (including the possible risk of accident, injury, illness, death, damage, icipation in this ministry. I assume such risks regardless of their causes, o supervise any persons, traveling to and from the foreign country, U.S. creational ventures made on my own during the trip, and the negligence	
Global Impact Resources or its trustees, officers, empl sustain during the missions work. I release, discharge officers, employees, ministers, or leaders, in both their	cy of this mission and their permitting my participation, I will not hold loyees, ministers, or leaders liable for damages or any injuries I might e, and forever hold harmless Global Impact Resources and its trustees, r individual and representative capacities as applicable, from any and all or losses stemming from injury to person or property that arise from or work.	
I have carefully read this Release and Assumption of I realize that it will bind me, my family, my heirs, and p	Risk Agreement and understand its contents. I voluntarily sign it and personal representatives.	
Your Signature	Date	
Candidate Affiliate Form		
organization is to empower missionaries both domestically a proclaiming the Gospel of Jesus Christ to the nations of the voverseas; and 3) promoting the social and economic advances	dered as an affiliate for Global Impact Resources. I understand the mission of this and abroad while endeavoring to achieve three specific goals which consist of: 1) world; 2) establishing and equipping local churches and faith-based ministries ement of all people of every race, gender and nationality through the Word of ct Resources, I will embrace their mission and subscribe to their tenants of faith.	
(PDP) and I will adhere to its PDP policies. PDP allows me expenses, and ministry resources. I understand and agree th representing the vision of Global Impact Resources and my support goal before starting my ministry assignment. I under Global Impact Resources has complete discretion and direct control of Global Impact Resources. I am aware that I must my salary and ministry expense as a missionary minus 7% for	In partnership team through the organization's Partnership Development Program to be provided for financially concerning needs such as health care, living last I must attend an initial PDP training session in order to be well equipped in specific ministry responsibilities with the organization. I agree to reach my erstand that contributions are solicited with the understanding that the board of control over the use of all donated funds. All funds will be subject to the use and submit a budget request form in order to receive financial disbursements toward or administrative fees used for the operating functions and expansion of the future. In addition, I am responsible for maintaining my support team during the e calls, etc.).	
principles and if at anytime I violate the scriptures in terms of violation Global Impact Resources will work with my local c right to release any missionary or ministry in affiliation with	with Global Impact Resources I am found unable to uphold the following of heretical teachings, moral failure, and/or financial impropriety. If found in hurch pastor/elder to determine my future. Global Impact Resources reserves the the organization. Concerning my character, I will do my best to "walk in a aring fruit in every good work and increasing in the knowledge of	
Furthermore, upon processing this application, Global Impa perform a criminal record check.	act Resources has the permission to obtain my background information and	
By signing this form, I understand and agree to all of the abo	ove.	
Your Signature	Date	
Ministry Leader Signature	Date	