

Adult Leader Application
“Never The Same” Missions Panama 2012

Please select (X) one of the trip options

- Option 1: ___ July 2nd – July 15th, 2012. Cost: \$2,598 (\$2,698 after January 31, 2012)
Option 2: ___ July 2nd – July 22nd, 2012. Extended trip with excursions. Add \$1480 to base trip cost.
Trip cost does not include: Departure Tax/Security Fee and Fuel surcharge

Full Legal Name: (Please print as it will be on your passport)

Name as you want it on your nametag:

Permanent Home Address:

Marital Status: ___ M ___ S ___ Divorced

Age: _____ Birth date: _____

T-shirt size: (100% cotton) **Circle one: (Unisex Adult Tees) S M L 2XL**

Email: (PRINT CLEARLY) _____

In an emergency call: Parent ___ Guardian ___ Spouse ___ Other _____

Emergency Person's Name _____

Telephone numbers:

Home (___) _____ Work (___) _____

Cell (___) _____ Alternate (___) _____

Have you participated on a mission trip before? Y/N ___ If yes, which trip(s)?

How did you hear about this trip?

Dannah Gresh: _____

Secret Keeper Girl: _____

Pure Freedom: _____

Other: _____.

Please describe in a paragraph, why you feel God wants you to participate in the Never the Same mission trip.

Please describe in a short paragraph what qualifies you to work well with teenagers.

Give a short summary of your personal testimony.

List the name of the church you regularly attend. _____

Describe your church involvement.

Vocation/Occupation: _____

Can you work well under someone else's authority and enforce the rules established by the Mission's staff—even if things aren't being run the way you think they should? (Circle one): YES _____ I'm kind of controlling _____ that's hard!

As a potential adult sponsor for this mission trip, you're representing Jesus Christ and the "Never the Same" missions trip. We would much rather err on the side of being too cautious and conservative than too liberal. So, bluntly put . . . here's what we expect from you:

- To be godly role model
- Absolutely no smoking, chewing tobacco or drinking (this includes the entire two weeks we're together—flights, restaurants, etc.)
- No sarcasm (Teens are at the point in their development where everything is changing, and a simple zit can hurl them into a crisis. This is *not* the time to get laughs from sarcasm or clever put-downs. Your role as a godly leader is to provide positive affirmation and encouragement as well as unconditional love.)
- For potential adult leaders who also have a teen applying, we typically don't put parents and teens on the same team. Will it make a difference if you're not on the same team? YES _____ NO _____
- Are you applying to be an adult leader because you believe God is truly calling you on this mission trip . . . or do you simply not want to let go of your teen?
- If accepted as an adult leader, you would be with 5-6 other adults on a team of approximately 30 teens. If the "head leader" of your team makes decisions you don't agree with, can you be a team player, or will your attitude reflect that you don't agree with the way things are being run? Please be honest.

I'M A TEAM PLAYER _____ I LIKE TO BE IN CHARGE _____

What gifts/strengths will you bring to this trip?

Do you have any physical condition we need to be aware of?

YES _____ NO _____

If yes, please explain: _____

You will have at least one adult roommate during this trip. Will that be hard for you?

YES _____ NO _____

How much sleep do you require per night? _____

Do you struggle with a sleep disorder? _____

Are you willing to be flexible (getting up early, having possible last-minute changes, going the extra mile, eating food that may not be your favorite, getting little sleep)?

YES It'll be hard but I'll do it _____ NO _____

• Can you maintain a positive attitude when tired or under stress? YES ___ NO ___

• Have you ever been convicted of a felony? (Include any plea of guilty or no contest. Exclude minor traffic violations)

YES ___ NO ___

(If yes, explain)

How would you describe your personality?

___ Outgoing/a natural leader

___ More of a support person/team player

___ On the quiet side/like working behind the scenes

In what area(s) do you feel most confident?

___ Organizational skills

___ Teaching/mentoring

___ Leading/making necessary decisions that will benefit the group/ministry

___ Social activities planner / party person

What do you consider a weak area for you when it comes to student ministry? (Please be honest).

Participant's Name: _____
Personal Health History

To be completed by adult participant If “yes”, **circle number**. Please explain any “yes” answers below.

1. Have you had a tetanus booster in the last 10 years?
2. Any recent injury, illness, or infectious disease?
3. Had infectious mononucleosis “mono” in the last 3 months?
4. Any recurring or chronic illness/condition?
5. Have frequent headaches?
6. Ever had a seizure?
7. Ever been told by a medical practitioner that you have?
 - High blood pressure
 - High cholesterol
 - Heart murmur
8. Ever had discomfort, pressure, or pain in your chest during exercise?
9. Do you have asthma?
10. Do you have allergies (include medications, foods, environmental or insect stings)?
11. Have you been told to carry an Epi-pen? **see below
12. Currently taking any prescription or over the counter medications?
13. Currently taking any “natural” or herbal medications or supplements?
14. Any back problems?
15. Do you have diabetes?
16. Any intestinal problems (e.g. diarrhea, constipation, heartburn, reflux)?
17. Ever had an eating disorder?
18. Ever had emotional difficulties (e.g. depression, bipolar, cutting)?

***If you take medication for asthma, you must have enough medication for the duration of the trip.**

****If you have been advised to carry an Epi-pen for allergic reactions, your prescription must be current, and you will be required to prove you have it with you on the trip.**

Please explain any additional “yes” answers in the personal health history, noting the number of the question.

Please list any illnesses, other than those listed above, for which you have seen a physician or other health care provider in the last year.

Are you currently under the care of a physician or other medical practitioner for any condition? Please list.

Please list **all** current medications (prescription, over the counter, “natural” or herbal remedies, vitamins and supplements), dosages and reason for taking. Include those medications taken on a regular basis as well as those taken for occasional illnesses such as allergies, migraines, indigestion, etc.

Have you ever struggled with restricting your food intake, intentionally induced vomiting after eating, using laxative or diet pills, or been told you have an eating disorder? Y/N ___

If yes, did you seek professional help? If so, when and what treatment was received?

Have you ever been involved with self-mutilation or cutting? Y/N ___

If yes, do you currently mutilate or cut? Y/N ___

Have you ever been diagnosed with panic or anxiety attacks? Y/N ___

Are you currently under the care of a mental health provider (psychiatrist, psychologist, or professional counselor) for any of the above conditions? Y/N ___ Please briefly describe:

Please provide any details pertaining to your personal or family health not covered by the previous questions:

Please give three references of people who are currently a part of your life that we can contact regarding your personal character, integrity and leadership qualifications. (Example: small group leader, current pastor, co-worker etc.)

1. Name:

Phone: (Daytime) Relationship to you:

(Evening Phone)

How long have you known this person?

2. Name:

Phone: (Daytime) Relationship to you:

(Evening Phone)

How long have you known this person?

3. Name:

Phone: (Daytime) Relationship to you:

(Evening Phone)

How long have you known this person?

Time for more honesty . . . what's one thing we should be aware of in choosing you as a *mission's* team leader?

Consent for Medical Treatment / Release / Hold-Harmless for Travel

Name: _____ WHEREAS, I _____, wish to be a member of the summer missions program organized by Big World Ventures which will be traveling and staying in the U.S. and to and in other countries, and WHEREAS, certain circumstances and situations may occur resulting in my need for medical/ dental care and treatment, and further resulting in my inability to personally give consent for such care and treatment; THEREFORE,

1. In consideration of permission for myself to participate in said mission, I _____, being of legal age, authorize any agent of Big World Ventures, Inc., including their volunteer medical staff, to act in my behalf should I be unable to do so and to consent to reasonable medical/ dental care and treatment, including but not limited to diagnostic test, x-ray examination, anesthesia, surgery or other procedures which may be deemed necessary for (my child's/my) medical well-being for the duration of the mission.
2. This consent is given in advance of any specific diagnosis, treatment, surgery or hospital care required, but is given to provide authorization and specific consent for medical/ dental treatment and care in my behalf. Any consent by Big World Ventures, Inc., shall have the same force and effect as if I had personally given the consent.
3. I agree that I am solely responsible for any expenses that may arise from my medical expenses. All individuals in the Summer Missions Program serve at their own risk and Big World Ventures or Susie Shellenberger Ministries is not liable in the event of sickness, accidents, medical transportation or any other expenses beyond that of normal involvement.
4. In the event of any crisis - political, natural, or missions related, any political unrest or natural disaster, Big World Ventures decides if and where to send individuals in the Summer Missions Program.
5. Big World Ventures is a disciplined organization with regulations in certain areas, including conduct, dress, and Christian life-style. All individuals participating in the Summer Missions Program will adhere strictly to Big World Ventures' policies and are subject to dismissal for disobedience, without refund or reimbursement.
6. I also give Big World Ventures and Susie Shellenberger Ministries' permission to use my picture, voice and/or testimony in any type of promotional advertisement.
7. I hereby release and hold harmless Big World Ventures, its officers, employees and representatives/ volunteers from all liability for personal injury, as well as all property damage or loss arising out of my participation in the summer missions program.

Participant's signature: _____ Date: _____

(Adult applicant *must be at least 21 years of age*)

Applicant's Name: _____

Financial Agreement

If accepted for "Never the Same" mission trip, I understand that the total cost of the trip is due to Big World Ventures at P.O. Box 703203, Tulsa, OK 74170-3203.

I also understand that I'll need to obtain a passport if I don't already have one.

I also understand if anyone helps me financially with this trip, they must make their checks payable to Big World Ventures and request a receipt to receive tax credit. I realize that countries outside the US may have differing tax laws and may not accept this contribution as tax deductible.

If I end up bringing in *more* than the trip costs, Big World Ventures will hold any excess money for one year and apply it to another Missions trip for me. Donations to Big World Ventures are non-refundable. If, however, my contributors DON'T care about receiving a tax donation—if they simply want to contribute money to me personally for the missions trip—they can send those checks directly to me, and I may keep every bit that comes in exceeding my total cost for the trip. BUT my contributors will not receive tax credit.

I understand what the LIT \$58 application fee is for and that it is nonrefundable if I'm selected and decide not to participate. I also understand that the \$2,598 due to Big World Ventures does *not* include my round-trip transportation to Miami or my passport. After January 31, 2012, the base price of the trip increases to \$2,698. Other costs will include \$170 to cover Departure Tax/Security Fee and Fuel surcharge.

I understand the integrity and character involved in accepting donations from people toward this trip. I promise to send a note of gratitude to each person who contributes to my missions venture.

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

Pastor's Recommendation For Adult Leaders

Never the Same Missions Trip – Panama, 2012

The purpose of this recommendation is to find out as much as possible about the applicant's character, spiritual maturity, leadership skills and emotional stability. This particular mission's trip has a variety of ministry opportunities for team involvement, discipleship, physical demands and spiritual intensity. We are looking for adults with strong leadership skills to work with, mentor and spiritually encourage teens. We appreciate and depend on your honest opinion. Your evaluation is appreciated and held in strict confidence.

This form must be completed and turned into Big World Ventures before you can be officially accepted by "Never the Same" missions to participate in a summer mission venture.

Applicant's name: _____

Applicant's Address: _____

Applicant's Email: _____

Pastor's name: _____ Church phone :(____) _____

Church name: _____

Church address: _____

Please complete this form to: Never the Same Missions, Big World Ventures, P.O. Box 703203, Tulsa, OK 74170 or **fax to:** 918-481-5257. Pastor, if you'd like information on being a team leader on this trip please contact us at venture@bigworld.org or call **918-481-5223**.

1. How long have you known the applicant? _____

2. How well do you know him/her? ___ Not really well ___ Casually ___ Quite well

3. Which of the following best describes the applicant? **E**=Excellent **AA**=Above Average

A=Average **P**=Poor **U**=Unknown

_____ Flexibility _____ Dependability _____ Response to authority _____ Servant heart

_____ Spiritual influence _____ Leadership skills _____ Maturity _____ Spiritual Life

4. Does this person have a heart for teens and will this person be a good encourager, role model and mentor to teenagers?

5. Anything else we should know about this applicant?