



CULTIV8 RWANDA

JULY 2020

Overseas Mission Volunteer

Instructions for applicant:

1. Complete the application in full, in BLOCK CAPITALS please.
2. Attach a recent photograph to the application.
3. Submit your completed application form to Fields of Life
4. Please send reference forms to referees to be returned to Fields of Life

You can email or post your form to:

Email: stephen.johnston@fieldsoflife.org

Post: Stephen Johnston, Fields of Life, House of Vic Ryn, Moira Road, Lisburn, BT28 2RF



1. Personal Details	
Surname	Title
First names	Preferred name
Current Address	
Postcode	Country
Telephone	Mobile
Email	
Church (if attended)	

2. Further Details	
Date of birth (DD/MM/YY)	Place of birth
Gender (for accommodation purposes)	Marital status
Nationality (visa purposes)	
Passport number	Passport issue date (DD/MM/YYYY)
Passport expiry date (DD/MM/YYYY)	Place of issue
Full name (as in passport)	

Please note: For applicants who do not possess a passport, you must apply for it and send us the information as soon as you obtain it. A visa needs to be obtained if you travel on a British passport. This is an online application which will cost US\$50 and will be explained at team meetings. *Current price September 2019

3. Your background (spiritual information)

Have you participated in a Mission Trip before?

If yes, when?

Where?

Name of group or church:

Are you involved with any ministries in your church? If yes, please detail.

Do you serve in any volunteer/leadership roles in any ministry outside the church? If yes, please detail.

What are your personal gifts which you feel you would bring to the team?

Please briefly explain your reasons for participating in this mission trip.

4. Your background (work experience and capacities)

Present occupation:

Educational qualifications:

Occupational and professional skills:

Please tick areas where you have work experience or qualifications:

Accounting

Building/construction

Carpentry

Computing

Catering/food

Electrician

Evangelism

Craft

Graphics

Hospitality

Marketing

Medical

Music

Pastoral

Photography

Sports

Tailoring

Teaching

If necessary, or if you have other experience please detail:

5. Legal

Have you ever been convicted of a criminal offence? If yes, please give details (*disclosure is subject to the Rehabilitation of Offenders Act 1974*)

Are there any criminal charges pending against you? If yes, please give details:

Have you been disqualified in any way from working, or having contact with or near children? If yes, please give details:

Fields of Life require you to complete and Enhanced Disclosure Form; this will be provided in team meetings. The Enhanced Disclosure Certificate shows details of spent and unspent convictions and cautions. It also clearly indicates whether the applicant is on the ISAs Childrens list or Vulnerable Adults list and therefore is barred from working with those groups.

6. Medical details

GP surgery attended

Doctor's name

Address

Postcode

Country

Telephone

Email

Please tick below if you currently suffer or have previously suffered from any of the following:

Diabetes

Allergies, including drug and food

High/low blood pressure

Asthma

Disorders/phobias

Skin disorders

Epilepsy

Mental health problems

Arthritis/mobility issues

Heart problems

Dietary requirements

If yes to any of the above, please give details:

Have you suffered from any tropical diseases in the past? If yes, please provide details.

Are you currently on any medication? If yes, please provide details.

Will you have had surgery within 12 months of your departure date? If yes, please provide details.

Medical declaration

I hereby declare that the information herein is accurate.

I will inform the Team Leader immediately of any change in medical circumstances between the date signed and the commencement of the overseas team.

In the event of illness or accident requiring emergency treatment, I authorise the Team Leader/Co-leader/FOL Staff member to sign on my behalf any written consent required by hospital authorities (in the case that I am unable to sign on my own behalf, or in the absence of my parent or guardian).

Please note, FOL HQ will review and assess medical forms completed by team members and reserve the right, where medical conditions are deemed serious, to refuse cover under Group Travel and Personal Accident elements of the policy (the team member will however be able to enjoy the benefits of full Employer's Liability cover.

Data Protection Act 1998

Fields of Life will hold personal data on its volunteers both in manual format and on its computer system. By signing this application form the volunteer consents to his/her personal data being obtained, stored and used by Fields of Life whilst working in a voluntary capacity. However, your details will be treated as confidential and will remain only with Fields of Life and will not be passed on to any other organisation.

Applicant's signature:

Date:

Print name:

If under 18 years old, please get parent or guardian to sign below:

Parent/Guardian signature:

Date:

Print name:

Relationship to applicant:

7. Emergency contact details	
Contact 1	
Surname	Title
First names	Preferred name
Relationship to applicant	
Current address	
Postcode	Country
Telephone	Mobile
Email	

Contact 2	
Surname	Title
First names	Preferred name
Relationship to applicant	
Current address	
Postcode	Country
Telephone	Mobile
Email	

Please return the following forms by the application deadline on **Friday 15th November 2019**.

- CULTIV8 Rwanda 2020 Application form
- Attached photograph of applicant
- CULTIV8 Rwanda 2020 Reference Forms x2

Applications cannot be considered without all the above completed.

Please send to:

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