Cedar View Baptist Church

Mission Trip Application & Scholarship Guidelines 2019

Purpose: The Mission Trip Scholarship is designed for the Cedar View Baptist Church to partner in our mission to spread the gospel of Jesus Christ throughout the world by financially assisting individuals and teams for mission trips sent from Cedar View Baptist Church.

Goal: For scholarship candidates to be encouraged and prepared for the trip. For candidates to demonstrate efforts in gathering support. For the candidate to engage in a partnership/teamwork relationship with Cedar View Baptist Church for the name of Christ and for God's glory.

Requirements for receiving a mission trip scholarship:

- 1. Fill out a mission trip application.
- 2. Type a support letter and send it to a minimum of 10 people.
- 3. Attend two workshops:
 - "How to write a support letter"
 - "How to share your testimony and the gospel"
- 4. Applicant must be approved by the Missions Committee

Which Trip are you applying for?		
Are you applying for budgeted scholarship funds?	Yes	No

Registration Information

First Name:	Middle Name:	Last name:
Street Address:	City:	State, Zip Code:
Home Phone:	Cell Phone:	Work Phone:
Email Address:	Occupation:	Name of Employer:
Date of Birth:	Gender:	Trip?

Marital Status:		<u> </u>	Spous	es		Spouses	1
Maria Status.			Name			Phone	
						Number:	
Passport Info	ormation – This in	formation	n is re	quired fo	or all internat	tional missions	Trips
Do you have a Passport?				Please	circle Yes or	No	_
	t have a passport, th		or				
one at least 3 months in before mission trip							
Name exactly as it appears on Passport:							
Passport Numb							
Passport Expir	ation Date:						
Emergency (Contact Informati	on – Plea	ase pr	ovide tw	o emergenc	y contacts	
First Name:		Last Nan	ne:				
Street		City:				State, Zip	
Address:						Code:	
Home		Cell Pho	ne:			Work Phone:	
Phone:							
Email		Relations	ship				
Address:		to you:					
First Name:		Last Name:					
Street		City:	ile.			State, Zip	
Address:		City.				Code:	
Home		Cell Pho	ne:			Work Phone:	
Phone:							
Email		Relationship					
Address:		to you:					
Medical Info							
How is your ge		oiool?					
What was the date of your last physical? Will you get the required vaccinations?		Voc	No				
, ,	'	115 !	Yes	INO			
Do you have al							
	ietary restrictions?						
challenges?	ny other medical						
	edication, can you b	ring	Yes	No			
enough to last	the entire trip?						
Incurance In	formation:						
Insurance Information: Does your insurance cover you outside of the							
U.S.?	nance cover you out	Juc Of the					
What is the name of your insurance							
company?							
What is the telephone number of your							
insurance com	pany?						

What is the policy numb	er of your insurance	е				
company?	,					
, ,		- 1				
Reference Information	n: Please provid	e two reference	es (not family) that can attest to your			
Christian faith and life	•		oo (not rammy) anaar can cateer to you.			
First Name:	Last Na	ime.				
Street	City:	iiiie.	State, Zip			
Address:	City.		Code:			
Home	Cell Pho	ono:	Work Phone:			
Phone:	Cell File	one.	Work Priorie.			
Email	Dolotion	achin				
Address:	Relation	iship				
Address.	to you:					
Γ=						
First Name:	Last Na	ame:				
Street	City:		State, Zip			
Address:			Code:			
Home	Cell Ph	one:	Work Phone:			
Phone:						
Email	Relation	nship	·			
Address:	to you:					
<u> </u>		•				
Church Background	<u>.</u>					
Are you a member at Ce						
Church and if so, then for how long?						
If not a member at Cedar View Baptist						
Church, where do you attend church?						
Are you a member, and						
long?						
What ways have you served in the						
church or community and for how long?						
ondron or confindintly and for now long:						
Travel:						
	saial aliilla. Aalaista		anning americans that you feel may be			
			service experience that you feel may be			
helpful on this mission tr	ip (music, teaching	j, ilist ald, consti	uction, etc.).			
List all previous mission	trip or cross-cultura	al experience:				
Have you traveled intern	nationally before? If	so please indic	ate what countries, for what purpose, and			
for how long?:	.a.a.a.a.a.a	23, p.2300 maio	and must be an area of the street per pood, und			
131 11311 1311						
Please list any foreign la	المراجعة والمالية	ha				
i Pieace list anv toreion la	monade skills volt j	nave.				

Spiritual:

Briefly share your personal testimony of faith:
Briefly describe your patterns of personal devotion & discipleship:
Bhony december your patterne or personal develors a decemberrip.
What has God been teaching you this past year?:
Why do you want to go on this mission trip and how has God been leading you in this direction?
Please describe in detail any advice or comments from friends or family members meant to dissuade
you from going on this trip.
What do your immediate family members and closest friends think about your intentions to join this
trip?:
Please list any concerns you have about joining this trip?:
In your opinion, what are your group of sharpstor strength, and are as of sharpstor western and
In your opinion, what are your areas of character strength, and areas of character weakness?

Briefly explain what you hope to see the Lord do in and through you on this mission trip.				