



## Short Term Missions Application (December 2019)

Applicant's Name: \_\_\_\_\_ Date of Submission: \_\_\_\_\_

### INSTRUCTIONS

All applicants must complete Sections A-G.

All applicants under 18 years of age must also have their parent or guardian complete Section H.

The Met supports involvement in missions and encourages participants to distribute prayer letters to friends within The Met to raise support **with prior approval from The Met Missions Committee**. General solicitation of funds from the Met congregation is **not permitted**. The amount of funds received from such solicitation must be disclosed, and any amount collected which is in excess of the financial support need of the individual will be retained by The Met Missions Program and applied to similar projects.

The Met will consider providing personal financial support to help meet funding shortfalls. Financial support for short term missions trips is generally made available to full-time students and may also be provided to employed adults where financial need is established, provided the individual is an attendee of the Metropolitan Bible Church.

Please submit the application and attached documents by emailing [missions@Metbiblechurch.ca](mailto:missions@Metbiblechurch.ca) or mailing/delivering in a sealed envelope to 2176 Prince of Wales Drive, Ottawa, Ontario, K2E0A1, attention Missions.

If you have any questions, contact [missions@metbiblechurch.ca](mailto:missions@metbiblechurch.ca).

**The deadline for applications is 3 months prior to departure or as specified by the Trip Leader.**

## SECTION A: PERSONAL INFORMATION

Full Name: \_\_\_\_\_  
*Last* *First*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_

*City* *Province* *Postal Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth (DD/MM/YYYY) \_\_\_\_\_ Gender: MALE  FEMALE

Marital Status: SINGLE  MARRIED

Dependents: YES  NO   
Will they be participating on this trip? YES  NO

Languages Spoken Fluently: ENGLISH  FRENCH  SPANISH  OTHER(S)  \_\_\_\_\_

## SECTION B: MISSIONS OPPORTUNITY

Short Term Met Trip  Short Term Non-Met Trip  
(less than 1 month)

*For medium or long term opportunities, please complete the Met Missions Long Term Application Form.*

Trip/Destination: \_\_\_\_\_ Trip Leaders: \_\_\_\_\_

Trip Dates: \_\_\_\_\_

Agency Name: \_\_\_\_\_ Agency Contact Info: \_\_\_\_\_

Please describe what your team will be doing on this particular trip, as well as your specific role (if known).

\_\_\_\_\_  
\_\_\_\_\_

Explain why you feel motivated to participate in this short term missions opportunity and what you hope the desired outcome to be.

\_\_\_\_\_  
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List any previous missions experience you may have, including length, location, and organization.

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If you have previous missions experience, please share how this has influenced your everyday life.

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**SECTION C: SPIRITUAL LIFE**

**PERSONAL TESTIMONY & EVANGELISM**

Have you repented of sin and accepted Jesus as your personal Saviour? YES  NO

Have you publically declared your faith and have been baptized? YES  NO

Briefly describe how you came to trust in Jesus as your personal Saviour.

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Describe your present level of devotional life and Bible study.

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Describe how active you are in sharing your faith in day to day life.

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In 2-3 sentences, how would you share the gospel message?

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Describe any significant life changes you may have undergone in the past year.

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**CHURCH INVOLVEMENT**

Do you regularly attend the Met?

- Met Member Since:  Regular Met Attendee Since:  
 Occasional Met Attendee Describe:  Other Church Describe:

Are you actively involved in serving at the Met? YES  NO

List all present and past serving opportunities both within the Met and other churches, including duration of time served, and Ministry Leader.

Area of Ministry/ Service	Date	Church	Briefly Describe Involvement

**PERSONAL ATTRIBUTES:**

Describe your abilities, strengths, natural talents and spiritual gifts, and share how they may be beneficial on this particular trip.

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How well would you rate yourself in terms of flexibility and adaptability?

1                                      2                                      3                                      4                                      5  
 Not Well                                      Moderately Well                                      Very Well

How well do you take instruction?

1                                      2                                      3                                      4                                      5  
 Not Well                                      Moderately Well                                      Very Well

How well do you work on a team?

1                                      2                                      3                                      4                                      5  
 Not Well                                      Moderately Well                                      Very Well

**SECTION D: EMPLOYMENT STATUS**

Check all that apply:

- EMPLOYED FULL TIME                       EMPLOYED PART TIME                       UNEMPLOYED   
 STUDENT-FULL TIME                       STUDENT- PART TIME                       RETIRED

**SECTION E: FINANCIAL REQUIREMENTS**

Sources of financial support pledged or received from others should be disclosed at time of application, or upon request.

Total Cost of Trip: \_\_\_\_\_  
 Personal Contributions: \_\_\_\_\_  
 Funds Raised to Date: \_\_\_\_\_

**SECTION F: REFERENCES**

*Please list three references (email address must be provided). One reference should be Ministry related.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_  
 Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_  
 Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**SECTION G: ATTESTATION OF PARTICIPANT**

*I affirm that my answers are true and complete to the best of my knowledge.*

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

**SECTION H: UNDER 18 REQUIREMENT**

The parent/guardian of any applicant under the age of 18 must complete all areas in this section.

I am the... PARENT  GUARDIAN

Full Name of Parent/Guardian: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City Province Postal Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

I give permission for \_\_\_\_\_  
Name of Applicant  
 to participate in \_\_\_\_\_  
MET Approved Short Term Missions Trip

*I attest that that above information is accurate and true.*

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