

# EACH 1 FEED 1

Giving Hope • Building a Future

## Each One Feed One Missions Volunteer Application

Date: \_\_\_\_\_ Trip applying for: \_\_\_\_\_

Last name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

DOB: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Gender Male Female

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you have a valid passport? Yes No

What is your profession? \_\_\_\_\_

What is your specialty? If you are a student, what is your area of studies?

Are you flexible to work in a different part of your profession other than your specialty/area of studies? Yes No If so, please specify.

How many years of experience do you have in your profession? \_\_\_\_\_

Are you currently working in your profession? Yes No

Are you currently licensed in your profession? Yes No

Have you been on a foreign mission before? Yes No

If so, where and how long? \_\_\_\_\_

With whom? \_\_\_\_\_

Are you willing to refrain from smoking and/or drinking while participating on this outreach? Yes No

If necessary, are you able to function in an unsterile environment, such as working in a village or in a hut? Yes No

Do you work well with others? Yes No

Are you willing to get up early and go to bed late several days in a row?  
Yes No

Are you currently on any medication? If so, what: \_\_\_\_\_

Do you have any dietary limitations such as hypoglycemia, diabetes, etc.: \_\_\_\_\_

Please list any health issues that we should be aware of that would make it difficult for you to participate in this outreach.

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Why do you feel you should be involved in this mission?

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Do you know any foreign languages and if so, which ones?

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Name of Church \_\_\_\_\_

Member of pastoral staff who knows you best?

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Phone number and email address of above staff member:

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If your application is approved, do you have the necessary funding for the trip? Yes No

If not, what are you planning to do to raise the funds?

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Have you given your Pastoral Reference Form to the pastoral staff member who knows you best? Yes No

**Your application will not be processed until we have received all of the required documents, including your pastoral recommendation. Please send your completed application, along with a color copy of your passport photo page to the address below. NOTE: If you have already applied for or are renewing your passport, it is okay to submit your application before you have the new one on hand. Please make a note of that in the passport section and send us your passport copy when you receive it.**

**Each One Feed One, Int.  
Attention: Victoria McCarter  
40 Commerce Lane  
Lebanon, IL USA 62254  
[vmccarter@eachonefeedone.org](mailto:vmccarter@eachonefeedone.org)**

## Pastor's Recommendation

Applicant's Name: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Phone and email address: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Church: \_\_\_\_\_

Church's Address: \_\_\_\_\_

Applicant, please fill in the **above** information only.

Pastor, the above applicant has submitted your name as a character reference for Each One Feed One, International.

**This recommendation form is to be completed by the applicant's (present or former) pastor.** In the case that the applicant's father is the pastor, an elder or other church officer may act as pastoral reference. SERIOUS CONSIDERATION will be given to your evaluation. We value you as a reference concerning the applicant's character, experience, and aptitude for working with Each One Feed One. Please provide us with as much information about the applicant as possible so that we can accurately appraise their qualifications. Your prompt cooperation by completing and returning this form (within 7 days) is greatly appreciated. Be assured that your responses will be held in strict confidence.

Please answer the following questions:

1. How long have you known the applicant? \_\_\_\_\_

2. How well do you know him/her: Casual Fairly Well Very Close

3. Please assess the applicant's level of involvement in your church:  
Interested Attends irregularly Involved Distant Attends regularly  
Cooperative Enthusiastic Willing to help Other:

4. Has the applicant served your congregation in any capacity? If so, please give a brief description: \_\_\_\_\_  
\_\_\_\_\_

5. What are the strengths and gifts of the applicant according to your observations? \_\_\_\_\_

6. What is your assessment of the applicant's weaknesses/struggles?

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7. Please comment briefly on the family and social background of the applicant:

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8. Is the applicant physically able to work long hours in a potentially hot climate? Yes No Don't know

9. Has the applicant proven on any occasion to be unreliable, dishonest, or questionable in character? Yes No If yes, please explain:

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10. As far as you know has the applicant ever been arrested for any offense other than a minor traffic violation? Yes No  
If yes, please explain:

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11. To your knowledge, has the applicant ever been involved in drug or alcohol abuse? Yes No

*Thank you for your help. Please mail this completed form to:*

***Each One Feed One, Int.  
Attention: Victoria McCarter  
40 Commerce Lane  
Lebanon, IL 62254***