

2010

# Little Lambs Ministry

2010

Short-Term Ministry Project Application

Check if applying for leadership position \_\_\_\_\_

Legal Name (on passport) \_\_\_\_\_ Preferred Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

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

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

School \_\_\_\_\_ Your Phone ( \_\_\_\_\_ ) \_\_\_\_\_

School Address \_\_\_\_\_ Until \_\_\_\_\_

E-mail \_\_\_\_\_ Date of Birth \_\_\_\_\_ T-shirt Size \_\_\_\_\_  Male  Female

Church \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Passport number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
**(If you don't have a passport, apply as soon as possible)**

Preferred Departure City \_\_\_\_\_

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

Email \_\_\_\_\_

1. Where do you want to go? *(Dates and prices to be determined. Please check with the Little Lambs Office)*

a) **UKRAINE** \_\_\_\_\_ **RUSSIA (July)** \_\_\_\_\_ **MOLDOVA (June)** \_\_\_\_\_

b) **When? June** \_\_\_\_\_ **July** \_\_\_\_\_

2. Do you speak a language other than English? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what language(s)? \_\_\_\_\_

3. Describe your health, including allergies: \_\_\_\_\_

**Please answer briefly the following questions:**

4. Describe your relationship with Jesus Christ.

5. What previous mission experience do you have?

6. Why do you want to work with Little Lambs Ministry this summer?

7. What strengths and weaknesses will you add to your team?

8. Describe your confidence in leading in any of the following camp activities: music, crafts, games or skits.

**Please initial each line below indicating that you understand and agree with each statement.**

\_\_\_\_\_ I understand that the \$250.00 deposit is non-refundable, except in cases of emergency cancellation.

\_\_\_\_\_ I understand that airline tickets must be reserved and purchased early, so I am responsible to meet all financial deadlines given by the Little Lambs office.

\_\_\_\_\_ I understand that any money raised over the amount I need cannot be refunded to donors, but rather will go to meet the financial needs of my team and the orphanage I will be working at.

\_\_\_\_\_ I agree to read the Little Lambs manual prior to the camp, even if I have gone before, and also adhere to any training, guidelines and rules given.

\_\_\_\_\_ I understand that I am volunteering under the authority of a team leader, and I am willing to serve in whatever way needed by the Ukrainian and Russian teams.

\_\_\_\_\_ I understand that any projects or additional assistance not originally planned by Little Lambs Ministry or provided through the summer camps must be approved by Strumok (the Little Lambs office in Kiev).

**Please list two people in your church family who know you and will serve as references:**

a. \_\_\_\_\_ Phone \_\_\_\_\_

b. \_\_\_\_\_ Phone \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**APPLICATION AND DEPOSIT DEADLINE:  
February 15, 2010**

**Please send this application, a recommendation letter from your pastor, and deposit of \$250.00 to:**

***Little Lambs Ministry - P. O. Box 87463 - Carol Stream, IL 60188  
Tel (630) 260 - 1947***

For office use only:				
Received _____	Deposit _____	Manual _____	Visa _____	Rel Fm sent _____
A/D LTR _____	Refs _____	T-Shirt _____	Balance Pd _____	Rel Fm in _____