



Team Member Application



Complete and send to your Team Coordinator listed below:

Name: _____

Address: _____

Email: _____

Project Name: _____

Location: _____

Project Dates: _____

Date: _____ M F

Name: _____
(Legal name used on passport application)

Spouse: _____

Address: _____

_____ City State Zip

Phone: _____
Home Work

Email: _____

Date of Birth: _____

Citizenship: _____

Social Security Number: _____

Have you traveled outside of North America before?

Specify: _____

Valid Passport? _____

Passport Number: _____

Passport Expiration: _____ Type: _____

Foreign language: _____

Occupation: _____

Special skills or services available:

Physical condition: _____

Good _____ Fair _____ Poor _____

Specify if under physician's care: _____

List previous Work & Witness participation:

Local Church: _____

Pastor: _____

Address: _____

_____ City State Zip

Phone: _____

Pastor's approval: _____
Signature

Other comments: _____

Applicant's Signature: _____

Emergency Contact (while you are in Ukraine)

_____ Name

_____ Address

_____ City State Zip

_____ Telephone Area Code and Number