

Catawba Valley Baptist Church

Missionary Housing Application

Please complete the following application and submit to the Missionary Residence Team. Included with application the following:

.Completed and signed request and Policies and Procedures form.

.Written testimony/statement of faith

.(3) References with contact information

.Pictures (optional)

Name: _____

Address: _____

Phone: _____ Alternate _____

E-Mail: _____

DOB: _____

Passport#: _____

U.S. Citizen: yes _____ no _____

Sex: _____ M _____ F

Marital Status _____

Children _____ YES _____ No

Affiliation: _____

In case of emergency, please contact:

Name: _____

Address: _____

Phone: _____ Alternate _____

Your general health:

_____ Excellent _____ Good _____ Fair _____ Poor

Do you _____ Yes _____ No

Have chronic ailment?

Have a disability?

Drink alcoholic beverages?

Smoke, use tobacco?

Use non-medicinal drugs?

If you answered "yes", please explain: _____

Special interests and skills:

Most recent mission field location:

Dates: from _____ to _____

Supporting Agency: _____

Supervisor: _____

What did you like most about your experience?

What did you like least?

Previous mission field location:

Dates: from _____ to _____

Supporting Agency: _____

Supervisor: _____

What did you like most about your experience?

What did you like least?

Stateside assignment goals:

Please list goals you have while on stateside assignment. Please be specific. Include number of hours planned per week on premises and number of hours per week traveling.
