

MISSION PERSONNEL INFORMATION

Basic Data

Last Name	First	Middle Initial	Social Security #
Address			Home Telephone ()
City	State	Zip	Work or School Telephone ()
E-Mail			
Alternate address of a person who can always reach you:		Are you a US Citizen?	
Name	Relation	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, do you have the legal right to retain employment in the US?	
Address		<input type="checkbox"/> Yes <input type="checkbox"/> No	
City/State/Zip			
Telephone ()			
Date of Birth	Place of Birth	What is your primary language?	
What other languages do you speak? Levels: T= Tourist; C= Conversational; NF =Nearly Fluent			
Availability and Program			
Desired length of service (✓✓ double check first preference; ✓ single check all other possibilities)			
_____ more than 4 years _____ 2 years _____ 3-6 months _____ 2-4 years _____ 6-12 months _____ less than 3 months _____ summer service only			
Date available for service:		Keep application open until this date:	
What issues/factors could affect: a) your availability: b) your ability to complete the intended period of service?		Program preference (refer to descriptions in cover letter) ✓✓ Double check first preference ✓ Single check all other possibilities _____ Long-term mission personnel _____ Volunteer for Mission (1-year program) _____ Episcopal Young Adults Service	

Assignment-Check appropriate boxes	
<input type="checkbox"/> Open to discuss a variety of position/program options <input type="checkbox"/> Particular interest in the following positions/programs	<input type="checkbox"/> Open to serving in a variety of geographical settings <input type="checkbox"/> Particular interest in the following geographic regions:
<p>TYPES OF MISSION SERVICE for which you believe you can do well in an international context: (check <u>all</u> that apply):</p> <input type="checkbox"/> Administration/Professional: specify field: <input type="checkbox"/> Community Development/Agriculture: specify field <input type="checkbox"/> Education: English as Second Language <input type="checkbox"/> Education (K-12): preferred subject/grade level:..... <input type="checkbox"/> Education (post-secondary/graduate/theology): subject areas & level: <input type="checkbox"/> Education (other): specify field..... <input type="checkbox"/> Evangelism: special interest area <input type="checkbox"/> Health Care: field/specialization <input type="checkbox"/> Support Services (bldg & maint., skilled trade, child care, office etc.): specify field <input type="checkbox"/> Youth or Social Service: specify field <input type="checkbox"/> Other: specify	
Church Membership	
Parish: Diocese: Church in Communion with the Episcopal Church:	
Address: City/State/Zip:	Denomination: Priest/Pastor: Telephone ()
Describe your involvement in congregation/church:	
Volunteer Service	
Describe your involvement in civil or volunteer service:	

Education			
SCHOOL NAME AND LOCATION	Course or Major	No. of years	Degree and Date
High School			
College or University			
Graduate School/Seminary			
Business/Trade/Technical/or Other Schools			
Other Continuing Education			
Honors or Awards			
Employment History			
Begin with current or most recent employer. Include those positions for which you worked more than 20 hours per week.			
1. Employer Name		Position Title	
Address		Date employed: from/to	
City/ State/ Zip		Description of responsibilities	
Telephone ()			
May we contact your current or most recent employer at this time? ____ Yes ____ No			
2. Employer Name		Position Title	
Address		Date Employed: from/to	
City/State/Zip		Description of responsibilities	
Telephone ()			
3. Employer Name		Position Title	
Address		Date employed: from/to	
City/State/Zip		Description of responsibilities	
Telephone ()			

Occupation and Skills			
Occupation (if student, intended occupation)			
Principal job-related skills you possess that may be used in an international context			
Other skills or abilities (P= Professional Training; E= Experienced; H= Hobby/non-technical ability)			
Job-related Licenses or Certificates/ State or Licensing Agency / Expiration Date			
Marital Status			
<input type="checkbox"/> Single never married		<input type="checkbox"/> Separated – date of separation	
<input type="checkbox"/> Engaged – date of wedding:		<input type="checkbox"/> Previously married – date of dissolution:	
<input type="checkbox"/> Married – date of marriage		<input type="checkbox"/> Widowed	
Full Name of spouse		Citizenship of spouse	
<p>If you are married, does your spouse plan to accompany you? Yes ____ No ____</p> <p>Couples Please Note: Each adult intending to live in the assigned country needs to fill out a separate Mission Personnel Information form, whether or not he/she seeks a mission assignment.</p>			
Family			
Provide information about your dependents. Place an "X" by those who will accompany you to the country of service.			
X	Full Name	Date of Birth	Citizenship

Placement and Match-making

Placement may be influenced by such factors as finances, housing, educational needs of children or other family or personal issues

Financial considerations: Do you have particular financial considerations that might influence the type and length of assignment you could accept? Yes ___ No ___ (If yes, please explain)

Life situations: Service in international settings may present challenges related to health, environment, climate and security among others. These issues may affect a person's ability to live and work in a particular setting.

Indicate below any concerns you have related to the following:

___ Diet ___ Environment ___ Availability of medical care/medications ___ Exercise

___ Climate ___ Security ___ Other-specify:

Describe:

Children's education (if applicable): If you have or expect to have school age children your term of service, are you open to: (check all that apply)

___ Local schools (non-English)

___ Boarding school in English language school

___ Local schools (English language)

___ Home School

Comments:

Passport Information

A passport is necessary for international service. If you currently have a passport, indicate below:

Full Name

Passport No.

Country of Issue

Expiration Date

Legal consideration

Sexual Misconduct Policy Certification:

(a) Has any civil, criminal, or ecclesiastical complaint ever been sustained or brought against you for sexual misconduct?

___ Yes ___ No (If yes, attach statement)

(b) Have you ever resigned or been terminated from a position for reasons related to sexual misconduct?

___ Yes ___ No (If yes, attach statement)

Prior or Pending Offenses:

(a) Have you ever been convicted of, pled guilty to or pleaded "no contest" to any crime, other than minor Traffic violations?

___ Yes ___ No (If yes, attach statement)

(b) Are any charges (for any offense, including traffic offenses), civil suits, or judgments outstanding against you?

___ Yes ___ No (If yes, attach statement)

References

Provide four names, including, pastor, professional/academic, employer
Print names and information neatly and clearly

1. Name	2. Name
Occupation	Occupation
Telephone Number ()	Telephone Number ()
E-mail	E-mail
Address	Address
3. Name	4. Name
Occupation	Occupation
Telephone Number ()	Telephone Number ()
E-Mail	E-Mail
Address	Address

Additional Information

How did you learn about global mission opportunities with the Episcopal Church? Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Clergy
<input type="checkbox"/> Friend/family
<input type="checkbox"/> Printed materials/announcement at church
<input type="checkbox"/> Mission event
<input type="checkbox"/> Contact with staff person | <input type="checkbox"/> College career service office
<input type="checkbox"/> College professor
<input type="checkbox"/> Surfing the web
<input type="checkbox"/> Advertisement
<input type="checkbox"/> Other: specify |
|--|---|

EPISCOPAL CLERGY AND OTHER ROSTERED PERSONS

NOTE: You need to notify your bishop that you are in conversation with Mission Personnel.

<input type="checkbox"/> Check here if you have notified your bishop Name of Diocese	Date of Ordination
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PLEASE READ CAREFULLY BEFORE SIGNING

1. All information provided on this Mission Personnel information form is complete and accurate, to the best of my knowledge.
2. Candidates who serve with the Episcopal Church Mission Personnel Office will be expected to understand, respect, and support the mission of the Episcopal Church Center.
3. Misrepresentation of facts in this Mission Personnel Information form will disqualify me from further consideration or, if I serve with the Episcopal Church Mission Personnel Office, may be sufficient cause for dismissal.
4. In compliance with Federal laws, all offers of employment are subject to verification of each applicant's identity and employment authorization. I understand that it will be necessary for me to submit such documents as are required by law to verify my identification and employment authorization.
5. Any position offered to me is contingent upon the satisfactory completion of reference checks and any other checks, testing or examinations as may be requested by the Episcopal Church/Mission Personnel Office.
6. I understand that nothing contained in this form, or in the granting of an interview is intended to create a contract between the Episcopal Church/Mission Personnel and me, either for employment or for providing of any benefits. No promises regarding employment have been made to me, and I understand that no such promises or guarantee is binding upon the Episcopal Church/Mission Personnel unless made in writing.
7. The Episcopal Church/Mission Personnel has my permission to investigate, at its discretion, my past employment history, personal references, and any other information contained in this Mission Personnel Information form.
8. I fully agree to the statements and conditions listed 1 through 7 above.

Applicant's Signature

Date

Use the checklist below to ensure your Mission Personnel Information form package is complete:

- Complete and sign the Mission Personnel Information form
- Spouse provides a separate Mission Personnel Information form (if applicable)
- Reference information printed neatly and clearly
- Include your name on the top of each page of your responses to the **Narrative Section**
- Include a resume with your completed materials

Send completed Mission Personnel Information form, narrative and resume to:
Mission Personnel, 6FL
The Episcopal Church Center
815 Second Ave
New York NY 10017-4561

Questions related to completing the Mission Personnel Information form can be directed to staff at
 Mission Personnel:
Phone: 1-800-334-7626 ext. 6124
Fax: 212-983-6377
E-Mail: mjobson@episcopalchurch.org

MISSION PERSONNEL INFORMATION
Narrative Section

Write your responses on a separate sheet of paper – be sure to include your name at top of each page. Try and find that fine line between writing too much (1/2 page per question) and too little (one or two sentences per question). The total of your responses should not be more than two or three typed pages.

1. Tell us a little bit about yourself.
Use these guidelines if you choose:
 - Qualities you have...Qualities you don't have
 - What are you good at? Not so good at?
 - Situations you are comfortable in...Situations you should stay away from
2. Describe your Christian faith and how you see God is active in your life.
3. What excites or intrigues you about global mission service?
What do you anticipate to be most difficult or challenging for you?
4. Describe any cross-cultural experiences you have had. What did you learn about your ability to live and work in a cross-cultural context. (If you have had limited cross-cultural experience, describe how you see yourself living and working in a cross-cultural context).
5. What other information or considerations to your candidacy do you wish to communicate?