|  |  |
| --- | --- |
| **H2H THAI LOGO.jpg** | **Hand to Hand Foundation**  252/83 Moo 13 Nongprue Banglamung  Pattaya – Chonburi 20150  Tel: 089 093 6067, 087 0629304  Foundation Registration: Chor Bor 11  www.handtohandpattaya.com  E-mail: [handtohandpattaya@yahoo.com](mailto:handtohandpattaya@yahoo.com) |

Please attach recent photo

# CONFIDENTIAL INTERN APPLICATION FORM

PLEASE READ CAREFULLY - PRINT CLEARLY

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | | | |  |  | | | | | |  |  |
|  | *Surname* | | | |  | *First Name* | | | | | |  | *Middle name* |
| Address: |  | | | |  |  | | | | | |  |  |
|  |  | | | |  |  | | | | | |  |  |
|  |  | | | |  |  | | | | | |  |  |
|  |  | | | | |  | | | |  | |  | |
| Home Telephone: |  | | | | |  | | | | Fax No.: | |  | |
| Work Telephone: |  | | | | |  | | | | Email: | |  | |
|  |  | | | | |  | | | |  | |  | |
| Sex: M / F | Date of Birth: | |  | | | |  | | Place of Birth: | | |  | |
|  |  | | *day/ month/ year* | | | |  | |  |  | |  | |
|  |  | | | | | | | | |  | |  | |
| Marital Status: | Single | Married | | Separated | | | | Divorced | | |  |  | |
|  |  | | | | |  | | |  | | |  | |
| Country of Birth: |  | | | | |  | | | Nationality: | | |  | |
| Passport Nationality: |  | | | | |  | | | Passport No.: | | |  | |
| Date of Issue: |  | | | | |  | | | Expiry Date: | | |  | |
|  |  | | | | |  | | |  | | |  | |
| If you hold a valid passport for another country, please give details: | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Does your country have any special entry restrictions / requirements for countries you are about to go to? | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Contact in Case of Emergency:** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Full Name: |  | |  |  | | | | | |  |  |
|  | *Surname* | |  | *First Name* | | | | | |  | *Middle name* |
| Address: |  | | | | | | | | | | |
|  |  | | | | | | | | | | |
|  |  | | | | | | | | | | |
|  |  | | | |  |  | |  | | | |
| Home Telephone: |  | | | |  | Fax No.: | |  | | | |
| Work Telephone: |  | | | |  | Email: | |  | | | |
|  |  | | | |  |  | |  | | | |
|  |  | | | |  | |  | |  | | |
| English Speaking Ability: | | Excellent (Native) | | | | | Good | Fair | Poor | | |
| English Reading/ Comprehension Ability: | | Excellent | | | | | Good | Fair | Poor | | |
| Other Languages Spoken & Read: | |  | | | | | | | | | |
|  | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Have you traveled to Asia before: | | |  | | | | | | |
|  | | | | | | | | | |
| Have you served with other missionary organizations: YES / NO | | | | | | | | | |
| If yes, when, for how long and where: | | | | | | |  | | |
|  | | | | | | | | | |
| Name of Organization: | | | | | |  | | | |
| What role or area were you involved in? | | | | | |  | | | |
| When did you commit your life to Christ? | | | | | |  | | | |
|  | | | |  | | | | | |
| **Personal Statement:** What does the Lord Jesus Christ mean to YOU? | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| What do you consider to be your ministry gifts and abilities? | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| **Please circle experience/skills you have:** | | | | | | | | |
| Carpentry | Musical | | | Electrical | | | Accounting/  Bookkeeping | Mechanical |
| Teaching | Medical | | | Drama | | | Administration/  Secretarial | Computers |
| Plumbing | Others: | | |  | | | | |
|  |  | | |  | | |  |  |
| Interests/Hobbies: |  | | | | | | | |
|  |  | | |  | | |  |  |
|  |  | | |  | | |  |  |
| 1. What kind(s) of ministry would you like to be involved in? | | | | | | | | |
|  | | | | | | | | |
|  |  | | |  | | |  |  |
| 1. What is your reason for coming to Thailand? | | | | | | | | |
|  | | | | | | | | |
|  |  | | |  | | |  |  |
| 1. Is there anything else you would like to tell us about yourself? | | | | | | | | |
|  | | | | | | | | |
|  | | | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Intended length of time working with Hand to Hand Thailand: | |  | | | Days/Weeks/Months |
| Dates Preferred: |  | | | | |
| Leaving from  (Country): |  | |  | Coming Alone or With Others: |  |
| Date of Arrival: |  | |  | Flight/Train No: |  |
| Flight/Train Arrival time: |  | |  |  |  |
| Date of Departure: |  | |  | Flight/Train No: |  |
| Departure Time: |  | |  | | |
| **Note: Please notify us of any changes to arrival/departure information.** | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Do you intend to do other trips during your time with us? YES / NO  If yes, please give details: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Do you plan to work with other ministries while you are here? YES / NO  If yes, please give details: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Can you meet the financial obligations for this trip, including all costs on the field? YES/NO | | | | | | | | | | | | | | | |
| If no, please explain: | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **Will you make every effort to:** | | | | | | | | | | | | | | | |
| * Work harmoniously with other volunteers, missionaries, and national workers? * Submit your own personal desires/standards (food, dress, etc.) to the standards of the field? * Work in whatever way is required/needed and submit to the leadership of the staff?   Yes, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will make very effort to follow the above. | | | | | | | | | | | | | | | |
| Church Pastor's Name: | | | |  | | | | | | | | | | | |
| Church Address: | | | |  | | | | | | | | | | | |
| Tel. No: |  | | | | Fax No: |  | | | | | E-mail: | |  | | |
| Denomination: | | | |  | | | | | Years of Attendance: | | | | |  | |
| Involvement in the Church i.e. member, musician: | | | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **I declare all information disclosed in this application form to be true and correct.** | | | | | | | | | | | | | | | |
| **I have not withheld any relevant information.** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | Signature: |  | | | | |  | | Date: | |  | | |  |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| Release Statement | | | | | | | | | | | | | | | |
| **Please sign the following statement absolving the ministry of all liability during your time here.**  **(If you are under the age of 18, please get your parents to sign on your behalf.)** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| "As a volunteer with Hand to Hand, I hereby release them from any liability or responsibility for injury to me of any kind, including but not limited to, bodily injury, emotional distress, or economic loss, that I may sustain, or may otherwise incur, whilst I am acting as a volunteer of my own free will. | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
|  | | Signature: |  | | | | |  | | Date: | |  | | |  |
|  | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| **PLEASE CHECK TO MAKE SURE THAT YOU HAVE:** | | | | | | | | | | | | | | | |
| * Completed all 5 pages of the application form, and signed it. | | | | | | | | | | | | | | | |
| * Signed "Release Statement”. | | | | | | | | | | | | | | | |
| * Attached 1 passport-size photograph, and photocopy of passport page. | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| * Valid health insurance or travel insurance. | | | | | | | | | | | | | | | |
| * Given the Pastor's Recommendation to your Church Pastor to complete and return. | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| ***PLEASE NOTE:*** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| *This is an* ***application form only****, and is subject to confirmation by Hand to Hand. Please do not buy your tickets, etc .until you have been notified of acceptance.* | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CONFIDENTIAL PASTOR'S RECOMMENDATION | | | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| Dear Pastor, | | | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| The applicant below is in the process of applying to be a short-term staff person with Hand to Hand in Thailand. Our ministry is involved in equipping and utilizing short-term volunteers with a heart for missions.  We would greatly appreciate it if you would take the time to answer the questions below. Please provide an accurate and candid appraisal of the applicant's suitability for this position. This information will be kept strictly confidential. Once completed, please return this form ***directly to us.***  Thank you! | | | | | | | | | | | |
| Applicant's Name: | | |  | | | | | | | | |
| Applicant's Address: | | |  | | | | | | | | |
|  | | |  | | | | | | | | |
|  | | |  | | | | | | Country: | |  |
|  | | |  | | | | |  | | |  |
| Church Fellowship: | | |  | | | | | Denomination (optional): | | |  |
|  | | |  | | | | | | | | |
| Pastor's Name: | | |  | | | | | | | | |
| Contact Address: | | |  | | | | | | | | |
|  | | |  | | | | | | | | |
|  | | |  | | | | | | Country: |  | |
|  | | | | | | | | | | | |
| Tel. No: |  | | | Fax No: |  | | | | E-mail: |  | |
|  | |  | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. How long have you known the applicant? | | | | | | |  | | | | |
| How well would you say that you know the applicant? | | | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. What Christian service is the applicant involved in (i.e. musician, cell group leader)? | | | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. What giftings does the applicant have? | | | | | |  | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. Do you feel the applicant will be able to meet the financial costs relating to this ministry trip, including costs within the host country, so that they will not be a burden on the receiving ministry? YES NO | | | | | | | | | | | |
|  | | | | | | | | | | | |
| 1. To your knowledge, how does this person respond under stressful circumstances? | | | | | | | | | | | |
|  | | | | | | | | | | | |
|  | | | | | | | | | | | |

**Please evaluate the applicant in the following areas using the scale listed below.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Not Known** | Poor | **Below Average** | Average | **Above Average** | Excellent |
| Actively Involved in Church |  |  |  |  |  |  |
| Spiritual Awareness |  |  |  |  |  |  |
| Submission to Authority |  |  |  |  |  |  |
| Burden for "Lost People" |  |  |  |  |  |  |
| Ability to Communicate |  |  |  |  |  |  |
| Initiative |  |  |  |  |  |  |
| Mental Alertness and Ability |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Cross-Cultural Sensitivity |  |  |  |  |  |  |
| Flexibility |  |  |  |  |  |  |
| Leadership Ability |  |  |  |  |  |  |
| Teamwork |  |  |  |  |  |  |
| Helpfulness |  |  |  |  |  |  |
| Developing Relationships |  |  |  |  |  |  |
| Self-Image |  |  |  |  |  |  |
| Well-Liked by Others |  |  |  |  |  |  |
| Emotional Stability |  |  |  |  |  |  |
| Good Judgment |  |  |  |  |  |  |
| Sensitivity to Others |  |  |  |  |  |  |

|  |  |
| --- | --- |
| 1. Any other observations/ comments: |  |
|  | |
|  | |
|  | |
|  | |

**Please return directly to: Hand to Hand Pattaya**

**Email: handtohandpattaya@yahoo.com**