**VOLUNTEER FORM (1C)** Admission, Training Program 1000 Missionaries Movement

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## **PERSONAL DATA**

| Name:                 |                         |                   | Αg           | ge:               |
|-----------------------|-------------------------|-------------------|--------------|-------------------|
|                       |                         |                   | Nationality: |                   |
| Date of Birth:        | Pla                     | ce of Birth:      |              |                   |
|                       |                         |                   |              |                   |
|                       | Weight: (kg)            |                   |              |                   |
| Date of Baptism:      | Chu                     | rch Membership: _ |              |                   |
| Union – Mission/Cor   | nference:               | _                 |              |                   |
| Email Address:        |                         | Mobile n          | umber/s:     |                   |
|                       |                         |                   |              |                   |
| EDUCATION             |                         |                   |              |                   |
| Elementary School:    |                         |                   | Year 0       | Graduated:        |
| High School:          |                         |                   | _ Year 0     | Graduated:        |
| Vocational:           |                         |                   | _ Year G     | Graduated:        |
| College/University: _ |                         |                   | _ Year C     | Graduated:        |
| Highest Degree Ear    | ned: □Bachelor's Deg    | ree □Master's l   | Degree       | □Doctorate Degree |
| Course/Area of Stud   | ly:                     |                   |              |                   |
| SKILL/ABILITIES       |                         |                   |              |                   |
| Formal training (Skil | ls) please check/tick b | юх                |              |                   |
| □ Music □ Compu       |                         |                   | uter:        |                   |
| □ Vocals              |                         |                   |              |                   |
| □ Instruments         |                         |                   |              |                   |
|                       |                         | _ Others          | s:           |                   |
| □ Carpentry           |                         |                   | -            |                   |
| □ Automotive          |                         |                   |              |                   |
| □ Farming             |                         |                   |              |                   |
| Abilities             |                         |                   |              |                   |
| Hobbies:              |                         |                   |              |                   |
|                       |                         |                   |              |                   |
| Interests:            |                         |                   |              |                   |

| Languages (please check/tick box)          |                         |                     |
|--|-------------------------|---------------------|
|  | Can Speak Fluently      | Can Understand Only |
|  |                         |                     |
|  |                         |                     |
|  |                         |                     |
| RECENT EMPLOYMENT                          |                         |                     |
| 1. Company:                                | Position held:          |                     |
| Start date:                                | End Date:               |                     |
| 2. Company:                                | Position held:          |                     |
| Start date:                                | End Date:               |                     |
| 3. Company:                                | Position held:          |                     |
| Start date:                                | End Date:               |                     |
| FAMILY INFORMATION                         |                         |                     |
| Father's Name:                             | Age:                    | Religion:           |
| Church Position (if Adventist):            |                         |                     |
| Mother's Name:                             |                         |                     |
| Church Position (if Adventist):            |                         |                     |
| Joining Spouse Name:                       |                         |                     |
| Emails & Mobile number/s):                 |                         |                     |
| CHURCH/MISSION                             |                         |                     |
| Church Responsibilities/Activities conduct | ed/participated         | Date/s              |
| (Mission services, crusades, evangelism    | •                       |                     |
| •  | •                       |                     |
|  |                         |                     |
|  |                         |                     |
|  |                         |                     |
| ADDITIONAL INFORMATION                     |                         |                     |
| Tell us about your desire to join the mis  | sionary work:           |                     |
| Where did you first learned about 1000 I   | •                       |                     |
| Whole did you mat learned about 1000 i     | VIISSIOHALY WOVEIHEIL!_ |                     |
|  |                         |                     |

| When did you decide to join?                   |  |  |  |  |
|--|--|--|--|--|
| Who influenced your decision to join?          |  |  |  |  |
| What experiences confirmed your decision       | to join?                                       |  |  |  |
|  |  |  |  |  |
| N/by about divou be accepted to the mission    | nom straining?                                 |  |  |  |
| - Willy should you be accepted to the missio   | nary training?                                 |  |  |  |
|  |  |  |  |  |
| 2. Which Spirit of Prophecy books have you     | read? (please check/tick the box)              |  |  |  |
| □ Messages to Young People                     | □ Letters for Young Lovers                     |  |  |  |
| □ Desire of Ages                               | □ Christ's Object Lessons                      |  |  |  |
| □ Steps to Christ                              | □ Welfare Ministry                             |  |  |  |
| □ Great Controversy                            | □ Gospel Workers                               |  |  |  |
| □ Adventist Home                               | □ Evangelism                                   |  |  |  |
| □ Child Guidance                               | □ Christian Service                            |  |  |  |
| 3. Have you been to a Barangay or Legal Co     | ourt for any crime or minor offense? Yes□ No□  |  |  |  |
| If yes, please explain further:                |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 4. Are there any previous physical, mental, of | or emotional problems that may possibly affect |  |  |  |
| your performances or adjustment to mission     | ary challenges? Yes □ No □                     |  |  |  |
| If yes, please explain further:                |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Signature of Applicant:                        | Date of Signing                                |  |  |  |