

2008

Little Lambs Ministry

2008

Short-Term Ministry Project Application

Check if applying for leadership position _____

Legal Name (on passport) _____ Preferred Name _____

Permanent Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Cell Phone (_____) _____

School _____ Your Phone (_____) _____

School Address _____ Until _____

E-mail _____ Date of Birth _____ T-shirt Size _____ Male Female

Church _____ Pastor's Name _____

Passport number _____ Expiration Date _____
(If you don't have a passport, apply as soon as possible)

Preferred Departure City _____

Emergency Contact _____ Phone _____

Email _____

1. Where do you want to go? (Dates and prices to be determined. Please check with the Little Lambs Office)

a) **UKRAINE** _____ **RUSSIA (July)** _____

b) **When? June** _____ **July** _____ **2 Weeks** _____

2. Do you speak a language other than English? Yes _____ No _____ If yes, what language(s)? _____

3. Describe your health, including allergies: _____

Please answer briefly the following questions:

4. Describe your relationship with Jesus Christ.

5. What previous mission experience do you have?

6. Why do you want to work with Little Lambs Ministry this summer?

7. What strengths and weaknesses will you add to your team?

8. Describe your confidence in leading in any of the following camp activities: music, crafts, games or skits.

Please initial each line below indicating that you understand and agree with each statement.

_____ I understand that the \$250.00 deposit is non-refundable, except in cases of emergency cancellation.

_____ I understand that airline tickets must be reserved and purchased early, so I am responsible to meet all financial deadlines given by the Little Lambs office.

_____ I understand that any money raised over the amount I need cannot be refunded to donors, but rather will go to meet the financial needs of my team and the orphanage I will be working at.

_____ I agree to read the Little Lambs manual prior to the camp, even if I have gone before, and also adhere to any training, guidelines and rules given.

_____ I understand that I am volunteering under the authority of a team leader, and I am willing to serve in whatever way needed by the Ukrainian and Russian teams.

_____ I understand that any projects or additional assistance not originally planned by Little Lambs Ministry or provided through the summer camps must be approved by Strumok (the Little Lambs office in Kiev).

Please list two people in your church family who know you and will serve as references:

a. _____ Phone _____

b. _____ Phone _____

Signature _____ Date _____

**APPLICATION AND DEPOSIT DEADLINE:
February 15, 2008**

Please send this application, a recommendation letter from your pastor, and deposit of \$250.00 to:

*Little Lambs Ministry - P. O. Box 87463 - Carol Stream, IL 60188
Tel (630) 260 - 1947*

For office use only:

Received _____

A/D LTR _____

Rel Fm sent _____

Deposit _____

Refs _____

Rel Fm in _____

Manual _____

T-Shirt _____

Visa _____

Balance Pd _____