



**Trip Name(s)**

1<sup>st</sup> Choice \_\_\_\_\_  
2<sup>nd</sup> Choice \_\_\_\_\_  
3<sup>rd</sup> Choice \_\_\_\_\_

**You have made a great decision to apply for a Highland Oaks Short Term Missions trip.  
May God be glorified, you blessed, and the kingdom expanded by this decision.**

*“Go therefore and make disciples of all nations, baptizing them in the name of the Father and of the Son, and of the Holy Spirit, teaching them to observe all that I have commanded you; and lo, I am with you always, to the close of the age.” Matthew 28:19-20*

**Personal Data:** (Please print or type)

Legal Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Do you have a criminal record? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Ages of children (if applicable): \_\_\_\_\_

If under 18 yrs of age: Name(s) of parent(s) or guardian(s): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent(s) email if minor: \_\_\_\_\_

**Travel Information:**

**\*\* Remember: Submit two photocopies of your passport picture page once you have a passport.**

**\*\* If you are in the process of obtaining your passport, please leave the next 2 lines blank.**

Passport Number: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Date of Issuance: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_

**Highland Oaks Involvement:**

Do you attend Highland Oaks worship services? \_\_\_\_\_ How long? \_\_\_\_\_

Are you a member of Highland Oaks? \_\_\_\_\_ How long? \_\_\_\_\_

List the classes, ministries or small groups you currently attend: \_\_\_\_\_

**Personality Profile:**

Describe your personal STRENGTHS: \_\_\_\_\_  
\_\_\_\_\_

Describe your personal WEAKNESSES: \_\_\_\_\_  
\_\_\_\_\_

Are you comfortable sharing your faith with others? \_\_\_\_\_

How would you describe yourself:  Introvert  Fact-oriented  Feeling  Decisive  
(Please check all that apply.)  Extrovert  Intuitive  Thinking  Perceptive

**Mission Experience:**

Describe the mission trips you have taken, if applicable. Include how long you were on each trip, where you went, and what impact each trip had on your life:

Trip Names and Dates: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Lessons Learned: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Occupation:**

Please describe your present employment and any pertinent information regarding work experience related to missions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Language Fluency:**

(Other than English; please rate: fluent, fair, or minimal)

Language	Number of Years	Conversational Fluency
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_____	_____	_____
_____	_____	_____
_____	_____	_____

**Miscellaneous:**

List any special skills and talents: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Funding Assistance**

Please check here if you wish to be considered for funding assistance to offset some of the costs of the project(s) for which you are applying. Please note: *Funding assistance may not be available for all projects. A list of projects approved for funding assistance may be obtained online at [www.hocc.org](http://www.hocc.org) or from the short-term missions leadership team. The level of funds available for a given project is budgeted in advance for the calendar year. Funding grants are available on a first-come, first-serve basis as long as funds remain available in the budget.*