



# WITHIN REACH GLOBAL

## Short-Term Volunteer Information Form

### INSTRUCTIONS

- 1. Complete the form in its entirety. Incomplete forms will be ignored.
- 2. Make sure that the form is submitted six weeks prior to your arrival. Please do not submit the form individually. Instead, submit the completed form to your team leader and the team leader will submit all the forms to us.

*Note: You don't have to print out this document to fill it out. All available fields are clickable and you can fill out the form right from your computer. Once you've filled out all fields, save the document with a filename that follows this format: [WRG Volunteer Info] - **[Your full name]** - **[Country]** (For example, if Jane Doe from the USA fills out the form, she'll be saving it with the following filename: [WRG Volunteer Info] - Jane Doe - USA.pdf*

### PERSONAL INFORMATION

**Name** (as it appears on your birth certificate/passport):

First Name:

Middle Name:

Last Name:

Date of Birth:

Age:

Sex:

Male

Female

Nationality:

Address:

City/Province:

State:

Country:

Home Phone:

Work Phone:

Mobile:

Email:

Skype ID

Marital Status

Single

Engaged

In a relationship

Married

Widowed

Separated

Divorced

# INVOLVEMENT IN THE BODY OF CHRIST

Church Name:

Pastor's Name:

Contact Number:

Email:

What ministry are you involved in at your home church?

Have you ever had any missions experience?	Yes	No
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If yes, please describe your experience and any significant roles you played (i.e. team leader, coordinator, etc.)

## PERTINENT HISTORY

*Note: It is very important that you be honest. These things will not necessarily disqualify you for missions involvement.*

**Please tell us if you have (in the past 2 years):**

Been in counseling?	Yes	No
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Served time in a detention center or jail?	Yes	No
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Been convicted of a felony?	Yes	No
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Used illegal drugs?	Yes	No
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Been involved with gang-related activities?	Yes	No
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Been involved with a cult or the occult?	Yes	No
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Taken depression or behavioral medication?	Yes	No
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Been sexually active outside of marriage?	Yes	No
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Attempted suicide?	Yes	No
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Been treated for physical impairment?	Yes	No
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Been treated for mental impairment?	Yes	No
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Had diabetes or hypoglycemia?	Yes	No
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Had seizures?	Yes	No
Had fainting spells?	Yes	No
Had an eating disorder?	Yes	No
Had breathing problems?	Yes	No
Had psychiatric care?	Yes	No
Had severe back pain?	Yes	No
Had heart problems?	Yes	No
Are you on any regular medication?	Yes	No

If you answered “Yes” to any of the questions above, please give a complete explanation here.

Describe your present physical fitness (e.g., walking, manual labor, heavy lifting, carrying luggage)

## SKILLS & TALENTS

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What spiritual gifts do you operate in?

What discipleship or spiritual leadership training have you undergone?

How would you like to serve the ministry of Within Reach Global?

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## EMERGENCY INFORMATION

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*In case of emergency, contact:*

Full Name:

Home Phone:

Work Phone:

Mobile:

Email:

Skype ID

**Medical Information:**

List any known allergies  
(including food allergies)  
or chronic life-  
threatening conditions

Please list any medical  
conditions helpful for a  
physician to know should  
you require emergency  
medical attention during  
the trip

*Thank you for taking the time to fill out this form! We look forward to working with you on the mission field! God bless you!*

**WITHIN REACH GLOBAL**

Honor God. Reach the unreached.  
[withinreachglobal.org](http://withinreachglobal.org)