

# Laymen Ministries

## Missionary Sponsorship Application

Please attach a recent picture of yourself here!

Thank-you for your interest in participating in the sharing of the Gospel in connection with the work of Laymen Ministries. Please provide us with the information requested on both sides of this form, as far as applicable.

Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip \_\_\_\_\_  
Email \_\_\_\_\_ Telephone \_\_\_\_\_ Cell \_\_\_\_\_  
Birth Date \_\_\_\_\_ SS# \_\_\_\_\_  Male /  Female  Married /  Single  
Can we use the internet and email to communicate about this application? \_\_\_\_\_  
Citizenship: \_\_\_\_\_ Church Membership \_\_\_\_\_  
Date of your Baptism: \_\_\_\_\_ Pastor's Name \_\_\_\_\_ Phone #: \_\_\_\_\_  
Your Occupation: \_\_\_\_\_  
Employer's Phone #: \_\_\_\_\_  
Special skills or abilities \_\_\_\_\_

Have you participated in any Church work? If yes, what were your duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To what country do you feel the Lord is calling you to go? \_\_\_\_\_

Do you have a personal preference? Why? \_\_\_\_\_

What would be your expected length of stay? \_\_\_\_\_

Available travel dates? \_\_\_\_\_

Why do you feel that the Lord is calling you to do this work? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any known health issues? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate the areas where you have experience and are willing to work:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Preaching              | <input type="checkbox"/> Small Group Bible Studies | <input type="checkbox"/> Training National Workers |
| <input type="checkbox"/> Personal Bible Studies | <input type="checkbox"/> Colporteur Work           | <input type="checkbox"/> General Leadership        |
| <input type="checkbox"/> Teaching School        | <input type="checkbox"/> Computer Work             | <input type="checkbox"/> Desktop Publishing        |
| <input type="checkbox"/> Health Education       | <input type="checkbox"/> Stop Smoking Programs     | <input type="checkbox"/> Other _____               |

Applicant's Signature \_\_\_\_\_

As you know, life in the foreign mission field can involve hazards. Many countries have political instability, crime, and other difficulties. It must be understood that, by the signing of this application, *Laymen Ministries* cannot be, and will not be, held responsible by applicant, spouse, children, or those in any way related to or in connection with the applicant, for any bodily injury, sickness, or loss of personal property that might come due to travel, or other incidents. One who goes to do this work must have faith that God has called them and trust that He is in control. *Laymen Ministries* will do all in their power to make the stay of the applicant as organized and safe as possible. Each applicant needs to raise \$2500 to launch their project. Send application to: *Laymen Ministries*, c/o Jeff Reich, 414 Zapada Rd., St. Maries, ID. 83861. If you have questions call: 1-208-245-5388 or email us at: office@lmn.org. Pray and study for God's will to be done.

**Education:** High School \_\_\_\_\_ Location \_\_\_\_\_ Graduate? Yes No  
 College \_\_\_\_\_ Location \_\_\_\_\_ Graduate? Yes No  
 Major \_\_\_\_\_  
 College \_\_\_\_\_ Location \_\_\_\_\_ Graduate? Yes No  
 Major \_\_\_\_\_  
 Trade/Business/Graduate School \_\_\_\_\_ Location \_\_\_\_\_  
 Graduate? Yes No Major \_\_\_\_\_

**Work History** (Please include positions, paid or volunteer):

Company name \_\_\_\_\_ Contact person \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone # \_\_\_\_\_  
 City, State \_\_\_\_\_ Zip \_\_\_\_\_  
 Length of employment \_\_\_\_\_ Position held \_\_\_\_\_  
 Responsibilities \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Company name \_\_\_\_\_ Contact person \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone # \_\_\_\_\_  
 City, State \_\_\_\_\_ Zip \_\_\_\_\_  
 Length of employment \_\_\_\_\_ Position held \_\_\_\_\_  
 Responsibilities \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Company name \_\_\_\_\_ Contact person \_\_\_\_\_  
 Address \_\_\_\_\_ Telephone # \_\_\_\_\_  
 City, State \_\_\_\_\_ Zip \_\_\_\_\_  
 Length of employment \_\_\_\_\_ Position held \_\_\_\_\_  
 Responsibilities \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

References: List 3 individuals (not related to you) who are familiar with your skills and/or qualifications to travel and live as a missionary and accomplish the duties you expect to undertake.

Name	Regarding (personal knowledge of you)	Address	Telephone #	Years acquainted