



Attn: Mobilization Dept, 10123 William Carey Dr., Orlando, FL 32832
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INTEREST

- Career
- Tentmaking
- Short-Term(1-2 years)
- Short-Term(_____)
duration

Preliminary Information Form

(Please print with black or blue ink and remember to photocopy for your records.)
If married, both husband and wife must complete separate forms

General Information

First Name: _____ Middle Initial: _____ Last Name: _____ Preferred Name: _____

PRESENT ADDRESS:

Street: _____

City: _____ State: _____ Zip: _____

Home Phone () _____ Cell Phone () _____

E-mail: _____

Present Occupation: _____

Work Phone () _____ Date of Birth ____/____/____
Month Day Year

Citizenship _____ Place of Birth _____

- Single
- Engaged
- Separated (Date) _____
- Married (Date) _____
- Divorced (Date) _____
- Widowed (Date) _____
- Remarried (Date) _____

Children's Names	Sex	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PERMANENT ADDRESS (If DIFFERENT):

Street: _____

City: _____ State: _____ Zip: _____

Phone () _____

Education & Training

College/Graduate/Post Graduate	Major/Degree Earned	Number of Credits			Dates Attended
		Missions	Bible	Theology	
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please circle if you are certified: Teacher Nurse Physician Accountant TEFL Other _____

Are you a licensed minister? yes no Ordained? yes no When? _____ By Whom? _____

Non-Formal Training (Bible, Discipleship, Missions, Campus, Music & Arts, etc.) Please List Program Names & Dates:

First Language: _____

Other Language(s) Spoken: _____

Christian Experience

When did you become a Christian? _____ When Baptized? _____ Describe the circumstances that led you to Christ:

How would you describe your relationship with God? Distant & Cool Struggling & Sporadic Growing & Learning Close & Warm

Briefly explain your choice _____

Ministry Experience: Indicate the type and circle the level of your past experience in Christian ministry Years _____ Months _____

1. _____	Little	Moderate	Experienced	_____	_____
2. _____	Little	Moderate	Experienced	_____	_____
3. _____	Little	Moderate	Experienced	_____	_____

Spiritual Gift(s): Please List _____

How are you exercising these gifts? _____

HOME CHURCH: _____ Affiliation/Denomination: _____

Address/City/State/Zip: _____

Telephone () _____ Pastor's Full Name: _____

Does your church have a strong missions outreach? Yes No How long have you been a member here? _____

How aware are they of your missions interest? Aware & very supportive Aware & possibly supportive Vaguely aware Not aware

Missions Profile

Describe why you are considering missionary service to an unreached people group: _____

Which major bloc(s) of unreached peoples interest you? [Please Circle]

MUSLIM CHINESE HINDU BUDDHIST TRIBAL SECULAR/ATHEIST

Please list interest in any particular countries / people groups: _____

Briefly describe your vision for **future ministry**: _____

How did you initially become aware of PIONEERS? _____

Any previous affiliation with PIONEERS? No Yes, please specify _____

Have you previously applied and/or worked short or long-term with any other mission agency? No Yes If yes, provide the name of the mission, dates of service, and nature of your relationship: _____

We hold Candidate Orientation for **prospective** members to join five times each year. When might you be interested in attending?

[Please Mark and Circle] January 200 _____ Mar/Apr 200 _____ June 200 _____ August 200 _____ October 200 _____

Lord willing, when would you hope to **begin overseas service**? _____

SIGNATURE _____ **DATE** _____