

# **EVANGELIZATION IN EASTERN EUROPE APPLICATION**

*P.O. Box 5907, Johnson City, TN 37602-5907*

*Phone: 423-928-5759 423-426-1196 or 1197 WWW.areasonforhope.com/eee*

**Check one of the following:**

- ☐ PRELIMINARY APPLICATION FOR CAREER MISSIONARY
- ☐ STUDENT FOR SUMMER WORK
- ☐ 1-2 YEAR VOLUNTEER TO WORK UNDER VETERAN MISSIONARY
- ☐ 1-2 INTERNSHIP WITH VETERAN MISSIONARY/PASTOR

## **GENERAL INFORMATION** (Use a separate sheet of paper if necessary)

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Nationality \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Present Occupation \_\_\_\_\_ Employer \_\_\_\_\_

List of foreign languages you speak \_\_\_\_\_

Do you have any debts? \_\_\_\_\_ If yes, what are your plans to retire them? \_\_\_\_\_

## **MARITAL STATUS**

Single \_\_\_\_\_ Engaged \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Divorced & Remarried \_\_\_\_\_

Have you or your spouse ever been divorced? YES \_\_\_\_\_ NO \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Age \_\_\_\_\_ How long married \_\_\_\_\_ No. of Children under 18 \_\_\_\_\_

If married, is your spouse 100% supportative of your going into mission work? YES \_\_\_\_\_ NO \_\_\_\_\_

## **EDUCATION** List all schools attended and training received, giving dates, school addresses and degree earned:

Do you plan on further study? \_\_\_\_\_ If yes, what course of study? \_\_\_\_\_

When would you be available for missionary service? \_\_\_\_\_ Can you attend a one week Missionary Candidate School? \_\_\_\_\_

Are you Independent, Fundamental Baptist in polity and practice? \_\_\_\_\_

**CHRISTIAN EXPERIENCE** (Please attach on a separate paper your salvation testimony and why you are interested in Evangelization in Eastern Europe)

Date Saved \_\_\_\_\_ Date Baptized \_\_\_\_\_ Are you active in a local church now? \_\_\_\_\_

Home Church and address \_\_\_\_\_  
\_\_\_\_\_

Pastors Name \_\_\_\_\_ Address \_\_\_\_\_

Pastor's Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

List your involvement in your local Church?

What other mission boards or missions agencies have you made application with or served under? \_\_\_\_\_  
\_\_\_\_\_

What type of ministry are you interested in? \_\_\_\_\_

What country or countries of Europe are you interested in? \_\_\_\_\_

Do you have any major physical limitations? If so explain \_\_\_\_\_

**GENERAL DOCTRINAL POSITION**

**DO YOU AGREE WITH THE FOLLOWING BASIC STATEMENTS?**

- The complete and divine verbal inspiration of the Bible (King James Version)..... YES\_\_NO\_\_
- The Triune Godhead: God the Father, God the Son and God the Holy Spirit..... YES\_\_NO\_\_
- The virgin birth, sinless physical life, death and bodily resurrection of Jesus Christ..... YES\_\_NO\_\_
- Salvation by grace through faith in the substitutionary death and blood of Jesus Christ..... YES\_\_NO\_\_
- The eternal security of the believer..... YES\_\_NO\_\_
- A regenerated, immersed church membership ..... YES\_\_NO\_\_
- The resurrection of the saved to heaven with Christ and the unsaved to eternal punishment in hell..... YES\_\_NO\_\_
- The Great Commission to believers to go into all the world preaching and teaching the Gospel to whosoever will..... YES\_\_NO\_\_
- The autonomy of the local church..... YES\_\_NO\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send a recent photo of yourself and spouse, if married.

Mail to: ***Dr. Jerry Mullendore, Director***  
***Evangelization in Eastern Europe***  
***P.O. Box 5907***  
***Johnson City, TN 37602-5907***