

231 Market Place #532, San Ramon, CA 94583 www.cbmglobal.org

Application for CBM Summer Project

Date:			
	or: mer Short Term Missions (STM) in Tai mer Internship (4-6 week)	iwan	
PERSONAL DATA			
Name:			
Date of Birth:	Age:	Gen	der:
Address:			
Home Phone:	Cell Phone	2:	
Email:			
Citizenship:	Passport C	Country:	
Marital Status:Sii Spouse's Name:	ngleEngagedMarriedWidov	wedSeparatedDivorced Years of Marriage:	dRemarried
		———	
Children's Name and			
Home Church:		Website:	
Address:		Phone:	
Denominational Affi	iliation:		
Pastor's Name:		Email:	
Other Ministry Affili	ation:		
Leader Contact Nam	ne:	Email:	
	-		

SPIRITUAL BACKGROUND

- 1. Give a brief testimony concerning your salvation and becoming a Christian.
- 2. Give a brief statement or outline of your understanding of the Gospel and God's plan of salvation.
- 3. How would you describe your relationship with God at the present time? What is your habit of maintaining your relationship with God?
- 4. How has God spoken/challenged/led you recently?

- 5. Who are some people that have encouraged you in your spiritual walk? How did they help you grow spiritually?
- 6. What is your "Spiritual Family-of-origin"? How were you influenced by the church you grew up in or the denomination you were affiliated with?

MINISTRY EXPERIENCE

- 7. Describe your ministry experience and area of special interest. Please share about your strengths and spiritual gifts in ministry. How have you been exercising them?
- 8. What do you think is your weakness? How do you see the Gospel relate to your weakness?
- 9. What kind of ministry experience or training have you had in your local church? (leading bible study group/fellowship, preaching, Sunday School, choir, children ministry, etc.)
- 10. What is your current involvement in evangelism? Have you had specific training in evangelism? If so, please describe.
- 11. List your past short-term missions experiences and the nature of the work.
- 12. List your past cross-cultural experiences.
- 13. Give a recent example of a conflict you had with a person of authority and your peer. How did you deal with these conflicts?
- 14. Please evaluate yourself in the following areas by placing a mark on the continuum: (see "Self Evaluation Questionnaire" on the last page of this application)

PERSONAL BACKGROUND

- 15. What training and employment experience have you had? Be specific.
- 16. List the languages you speak and rate your ability in each language.
- 17. List your talents and/or abilities (teaching, music, etc.)

18. Do yοι	i have any physical health issues that can affect your ability to travel and live in foreign countries?
•	Food Allergies or special Dietary requirement:
•	Physical Disability:
•	Medical Condition:
•	Medication(s) currently on:
•	Known Medication Allergies:

- Anything else you think that might affect your ability to travel:
- 19. Do you have any mental health issues that can affect your ability to travel and live in foreign countries? __Yes __No If yes, explain.
- 20. What is your educational background? List school, year of graduation, and degrees.

	School	Year Graduated	Degre	ee		
٦N	INECTION TO CBM					
4	Change with the base Coad base lades and	to be a want of CDNNs mainisten.	M/lass and seems and all a			
	Share with us how God has led you Chinese Bible Mission?	to be a part of CBM's ministry.	wny are you conside	ring serving with		
2.	Are there any known obstacles con	cerning your joining CBM?				
	After reviewing "What We Believe" on the CBM website (see About > "Who We Are" at cbmglobal.org), are you in agreement with it? YesNo If there are any areas of disagreement, please indicate which ones.					
	Provide two references, one from a Peer, and one from a Spiritual Mentor/Pastor. Please ask each to complete the respective form and submit to CBM (stm@cbmglobal.org).					
	Confidential Peer Reference Form	bit.ly/CBM-PeerRef-word1 bit.ly/C	BM-PeerRef-pdf1			
	Confidential Spiritual Mentor/Past	or Peference Form hit hy/CDM M	ontorPof word1 hit ly/CE	NA MontorPof ndf1		
	Comidential Spiritual Mentor/Fast	of Reference Form <u>bit.iy/cbivi-wi</u>	entorker-word1 bit.iy/cb	<u>swi-wentorker-pari</u>		
	ist their names and contact informa	ation.				
L				51		
L	Name	Relationship	Email	Phone		
L	Name	Relationship	Email	Phone		
l	Name	Relationship	Email	Phone		

certify that the information contained in this application is true and complete to the best of my knowledge an understand that any false information on this application may be grounds for not accepting me for this summer
project.

Signature: ______ Date: _____

SELF EVALUATION QUESTIONNAIRE for

As you respond to the following questions, please be as objective as possible.

CHARACTER TRAIT EVALUATION	NOT KNOWN	POOR	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	EXCEL- LENT	COMMENTS
SOCIAL MATURITY							
Ability to Communicate							
Ability to develop							
relationships							
Ability to confront							
Tactfulness/ sensitivity							
Teamwork							
LEADERSHIP MATURITY							
Drive/ initiative							
Mental alertness							
SPIRITUAL MATURITY							
Consistent spiritual walk							
Knowledge of the Bible							
Dependence on Prayer							
and the Bible							
Submission to authority							
Level of evangelism and							
Discipleship training							
EMOTIONAL STABILITY							
Self confidence							
Self perception							
Freedom from							
worry/anxiety							
Relating to the opposite							
sex							
Mental harmony							
PERSONAL MATURITY							
Self discipline							
Conscientiousness/							
Thoughtfulness							
Perseverance							
Common sense and							
judgement							
Flexibility Designation of the latest and the late							
Decisiveness/follow through							
Servant attitude							
Servant attitude							