

**Bread of Life Church Short Term Mission Application
(Form A)**

Part I: Personal Information

Name: _____ Date: _____

Address (current): _____

Address (permanent): _____

Telephone: _____ E-mail: _____

Date of Birth: _____ Sex: M / F Marital Status: _____

Fellowship: _____ Vocation: _____

Part II: Emergency Contact Information

Name: _____ Relation to Applicant: _____

Address: _____

Telephone: _____ E-mail: _____

Part III: Questions

Why are you going on this particular STM?

Describe your current relationship with the Lord.
