

Christian Friends of Israel - Volunteer Application Form

Date _____

Full bodied photo please
(DO NOT SEND
APPLICATION
WITHOUT PHOTO)

1. Personal Information

Name _____
Last First Middle Initial

Home address _____

City State Zip Country

Passport No. _____ Expires _____

Home Telephone No. _____ Work Telephone No. _____

E-mail address _____ Fax _____

Date of Birth _____ Male/Female _____ Social Security No. _____

Current Profession/Occupation _____

If retired, please state your previous occupation _____

I am applying for work at: () CFI Ministry Office () CFI Distribution Center

I would be willing to work at either of the two Centers: Yes / No

I am applying for _____
(State specific position that would be most fulfilling for you that you are qualified for.)

Date available to come: _____

Length of commitment: _____

How did you hear about CFI? _____

2. Previous Application

Have you previously submitted an application to Christian Friends of Israel? Yes / No

If yes, when: _____

Have you ever worked at any other Christian organization in Israel? If so, please provide the name of the organization, dates, and position held. _____

3. MARITAL STATUS

What is your marital status? Single _____ Widowed _____ Married _____
 (Check one) Divorced _____ Remarried _____ Date: _____

CFI does not encourage partners in marriage to leave their spouse for short or long-term service for ministry in Israel. Marriage partners must both feel the call to serve the Lord in Israel. Where one spouse is called to this ministry and the other to another ministry in Jerusalem, for whatever reasons, please give details:

Name of Spouse: _____

Is your spouse in agreement with your decision to serve with Christian Friends of Israel? Yes / No

Is your spouse willing to serve? Yes / No

Do you have children? Yes / No (If yes, give details) _____

Do you have any special family responsibilities (i.e. to elderly parents?) Yes / No

If you have a home, will it be properly looked after while you are away? Yes / No (Please explain)

4. Education/Profession

Beginning at High School, list all educational institutions attended:

School and Education:

Time Period:

	From Mo/Yr	To Mo/Yr

Profession: _____

Employment: _____

Present Employer: _____ Dates: From _____ To _____

Address: _____ City _____

State: _____ Zip _____ Country: _____

Duties Performed _____

If you are unemployed, please explain why. _____

Previous Employer: _____ Dates: From _____ To _____

Address: _____ City _____

State: _____ Zip _____ Country: _____

Duties performed: _____

Previous Employer: _____ Dates: From _____ To _____

Address: _____ City _____

State: _____ Zip _____ Country: _____

Duties performed: _____

5. Church Affiliation

What Church do you belong to: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Name of Denomination: _____

Pastor: _____

Would your church be interested in finding out more about the work both in this country and abroad? Yes / No

Any other comments or information: _____

6. Christian Background

Were you raised in a Christian Home? Yes / No

Date you were Born Again: _____ Please write your personal testimony on the page provided at end of application.

Have you been baptized? Yes / No (if yes, please give details)

Do you believe in all the gifts of the Holy Spirit? Yes / No Which gifts do you function in? _____

How and to what extent do you study the Bible? _____

What place does prayer have in your life? _____

Would you have any difficulty working and worshipping with Christians from Pentecostal/Charismatic or Non-Denominational churches? Yes / No

Name two books, other than the Bible, which have had a significant impact on your life: _____

7. Your View Of The Bible

I believe the Bible ... (Check One)

___ Is the infallible Word of God, and the standard for the Christian life and faith.

___ Contains the Word of God, but is not infallible.

___ Is an interesting spiritual document, but has to be re-interpreted for people and the needs of our time.

8. Your View On Israel

Why do you think God is calling you to Israel? _____

What is your understanding of Israel and the Jews? _____

What are your feelings towards the Arab peoples? Do you feel "called" to the Arabs? _____

9. Your Ministry

Do you have a definite call of God on your life to enter into full time ministry in Jerusalem? Yes / No

How do you recognize this call? _____

Please circle the area(s) of ministry that you feel the Lord is calling you to:

Administrative Department:

Administrative Assistant, Executive Secretary, Personnel Secretary, Receptionist

Accounting Department:

Accountant, Data Base Entry/Receipts

Computer Department:

Computer Technician, Computer Programmer, Webmaster

Publication Department:

Desk Top Publishing/Graphic Artist, Editor/Writer

Outreach Department:

Holocaust Team, First Fruits, Under His Wings

Distribution Center

Stock Room Sorter, Translator (Russian and/or Hebrew), Social Service Worker

Wall of Prayer Department:

Research Writer

Other:

Cook, Assistant Cook, Librarian, Maintenance, Translator (Russian, Hebrew or Yiddish)

Your Ministry/Creative and Artistic Abilities:

Do you have any specific skills you could see yourself contributing to the Ministry?

Do you speak any languages other than English? If so, which ones? _____

Are you using your gifts on a regular basis to glorify the Lord? If so, in what way? _____

Do you play a musical instrument? Yes / No If yes, please indicate which instrument(s) _____

Would you be willing to use your gift of music during our corporate times of worship? Yes/ No _____

Are you willing to help out when necessary in areas other than your designated responsibility, and do tasks that may be

dull, hard, or dirty as unto the LORD? _____

What do you believe to be the basic element of teamwork? _____

What difficulties, if any, do you find relating to your own sex or to the opposite sex? _____

Do you or have you ever had any problem with accountability or being submitted to leadership authority?

Talent Inventory

Listed below are various areas of experience useful to Christian Friends of Israel. Read through the list below and check off areas of experience. A blank indicates no experience at all in a particular area.

A. SUPPORT SERVICES:

- Carpentry
- Agriculture
- Architecture
- Construction
- Cook
- Electrical
- Gardening
- General Maintenance
- Janitorial & General Cleaning
- Masonry
- Mechanic
- Painting
- Plumbing
- Transportation
- Other: _____

B. BUSINESS/DATA PROCESSING

- Accounting
- Administration
- Bookkeeping
- Computer
- Filing
- Law
- Library
- Reception/Telephone
- Typing/Secretarial
- Word Processing
- Other: _____

C. TRANSLATION/LINGUISTICS

- Literacy
- Translation
- Language: _____
- Teaching English as second language
- Interpreting (i.e. English to Spanish)
- Language: _____
- Other: _____

D. COMMUNICATION

- Radio/TV Programming
- Radio/TV Recording Engineering
- Printing
- Graphics/Art
- Computer Layout & Design
- Programs: _____
- Drama
- Photography
- Other: _____

E. ARTS AND CRAFTS

- Sewing
- Needlework
- Painting
- Sculpture
- Basketry
- Other: _____

Using a scale of POOR / FAIR / GOOD / EXCELLENT, how would you describe your strengths/weaknesses in the following areas:

- a. Common sense / initiative _____
- b. Relating to others _____
- c. Integrity/honesty _____
- d. Teamwork _____
- e. Self-discipline _____
- f. Following instructions _____
- g. Adaptability _____
- h. Unselfishness _____
- i. Willingness to go the extra mile _____

10. Health

Is your general health - Excellent / Good / Fair / Poor?

Do you have any disease, disability or physical handicap that would have an effect on your work in any way? Yes / No

If yes, please relate briefly: _____

Have you been in the hospital for illness or surgery during the last five years? Yes / No (If yes, please give details)

Have you ever suffered from any form of mental or emotional illness? Yes / No (If yes, please give details)

In the past two years, have you used any type of sedative or tranquillizer? Yes / No (If yes, please give details)

Are you allergic to any medication or foods? Yes / No (If yes, please give details) _____

Are you currently on prescription medicine? _____

Have you ever used tobacco?	Yes / No	If yes, last time: _____
... Used alcohol?	Yes / No	If yes, last time: _____
... Used illegal or habit forming drugs?	Yes / No	If yes, last time: _____
... Been involved in homosexuality?	Yes / No	If yes, last time: _____
... Been involved in occult practices?	Yes / No	If yes, last time: _____
... Been involved in other religions or sects?	Yes / No	If yes, last time: _____

Year / Month

Comments: _____

Have you suffered any chronic illness during the past two/three years? Yes / No _____

Do you have a criminal record? Yes / No If so, please explain: _____

11. Nearest Relative

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Mobile phone: _____ E mail: _____

12. References

Name: (Pastor) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

Name: (former employer) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

Name: (Friend) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

Name: (Friend) _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ How long have you known them: _____ E mail: _____

13. Income

How do you plan to sustain your expenses? _____

Are you covered by medical insurance: Yes / No If yes, please supply the name and address of the Insurance Company:

Name: _____ Policy Number: _____
Address: _____ City: _____
State: _____ Zip: _____

If you do not have medical insurance, the ministry will provide basic minimal coverage after 90 days. You are required to cover the insurance expense for the first 90 days.

14. Rules and Regulations

I understand that:

- Long-Term Support Staff –must pay their own round trip transportation and all personal/utility expenses while in Israel. Christian Friends of Israel will provide shared housing, one meal a day, and monthly bus passes.
- Short-Term Support Staff –must pay their own round trip transportation and all personal/accommodation expenses while in Israel. Christian Friends of Israel will provide one meal a day and monthly bus passes.
- Long-Term Support Staff – Annual leave can only be taken after the completion of one-year service.
- Short-Term Support Staff are entitled to statutory holidays only (please see Office Policy).

“I acknowledge my responsibility to provide my round-trip transportation as well as all personal and utility expenses while serving with CFI. I hereby certify that I have verified all information given above is true and correct. Should I be accepted and placed as Support Staff in Israel, I agree to place myself under the authority of CFI during my term of service and abide by accepted standard of conduct of CFI. Should I act otherwise, I will be requested to leave Israel and return home immediately. I further understand that there is a 3-month probation period.

Applicant Signature

Date

