APPLICATION FOR FULL-TIME SERVICE

Name	[] Bro [] Sis	Age	
Last First	M.I. List language(s) spoken:	Proficiency	
Your nationality:	0 0 1	Fronciency	
Birth date:			
Present locality: City Country			
Mailing	Home phone ()		
Address			
	T7 1 1 1		
Education:			
School	Major	Degree	
Present or recent occupation:			
Dates you served full time:			
Locality and nature of full-time service:			
Name and phone of full-time service coordinator:			
Data gayadı Data be	antigod		
Date saved: Date baptized: I consists:			
Date you came to the church: Locality: Areas of church service you have been involved in:			
Areas of church service you have been involved in.			
Past participation in full-time training (dates and locate	tion):		
Marital status: [] Single [] Married [Engaged [] Divorced [] Separated	
Spouse's name: Spouse's Age:			
	Occupation:		
Spouse's attitude toward emigrating to Europe: [] Strongly Agree [] Agree [] Neutral [] Disagree			
Will you take your family to Europe? [] Yes [] No			
Names of children and ages:			
Are you and your family in good physical and psychological	gical condition? [] Yes [] No		
Physical disabilities/limitations:			
Psychological disabilities/limitations (past and present):			
You will be supported by:			
[] Yourself [] Church [] Family or Friends [] Other Means			
Other pertinent personal financial information:			
A C 11 11 4 4 1 1	, , , , , , , , , , , , , , , , , , ,		
Are you financially able to rent or purchase a house or	1	[] No	
Countries you are burdened for:			
When can you migrate?			
How long can you stay in Europe?			
Applicant's Signature	Data		

In the space provided below please write a brief description of your experience in building up the church life and your service in the church life in caring for others.		
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Please send the completed application to: Lord's Move to Europe

APPLICANT'S NAME:

P.O. Box 9107 Anaheim, CA 92812

manem, 011 52012

Fax: 714-828-4422 Phone: 714-828-4411

Email: Anaheim@lordsmove.org