APPLICATION FOR EMIGRATION TO EUROPE

Do your best to shorten responses so that they fit in form fields provided

NameLast First	[] Bro [] Sis	Age
		Proficiency
Your nationality:		Fronciency
Birth date:		·
Present locality:City Co	untry	
Mailing	· ·	
Address		
	TA '1 11	
Education:		
School	Major	Degree
Present or recent occupation:		
Dates you served full time:		
Locality and nature of full-time service:		
	nator:	
	Date baptized:	
	Locality:	
Areas of church service you have been invol	ved in:	
Past participation in full-time training (date	es and location):	
Marital status: [] Single [] Ma	arried [] Engaged [] Divorced []	Separated
Spouse's name:	5 5	-
Date of marriage:		
_	ope: [] Strongly Agree [] Agree [] Neutral	
	[] Yes [] No	- []8
Names of children and ages:		
Are you and your family in good physical ar	ad navahalagigal condition? [] Voz. [] No.	
Physical disabilities/limitations:		
Psychological disabilities/limitations (past a	and present):	 -
You will be supported by:		
	ily or Friends [] Other Means	
Other pertinent personal financial information	ation, including amount of debt:	
How do you intend to emigrate:		
[] By serving full time [] As a full-time s	tudent [] To take a full-time job [] To or	pen a home
Are you financially able to rent or purchase	· · · · · · · · · · · · · · · · · ·	[] No
Countries you are burdened for:		
_		
How long can you stay in Europe?		
	aheim for training?	
Then would you be available to come to All	anomi or manning.	
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. Response should fit inside box below.		

Please send the completed application to: Lord's Move to Europe

APPLICANT'S NAME:

P.O. Box 9107

Anaheim, CA 92812

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

Email: Anaheim@lordsmove.org