

RAPID RESPONSE TEAM

Volunteer Response Chaplain

(Applicants must be over 18 years of age)

(Please Print)

Title: _____ First Name: _____ Known As: _____

Last Name (family name): _____

Address: _____

_____ Post Code: _____

Date of Birth: _____

Tel: (Work) _____ (Home) _____ (Mobile) _____

E Mail Address (Please Print) _____

Marital Status: Married Single Divorced Separated Widow/Widower

Emergency Contact Name: _____ Tel No: _____

Church Affiliation: _____ Denomination: _____

Church Leader's Name: _____

Church Leader's contact information:

Position held: _____

Church Name: _____

Address: _____

Post Code: _____

May we contact them as a Referee? _____

Church Leaders E Mail Address: (Please PRINT): _____ Tel: _____

1. How did you hear about the Billy Graham Rapid Response Team?

2. Why do you desire to serve as a Volunteer Chaplain?

3. Please indicate the ministry role(s) you have served in the past.

Ministry Role (please show years of Service)

a) Details of Ordination (if applicable)

b) Pastoral - a ministry to others

c) Chaplain - Police, Fire, Ambulance or Military

d) Christian Counselling - Specify adult, youth, children

e) Children's Ministry - working with children

f) Youth Ministry - working with youth

g) Hospice Worker

h) Street/Town or School Pastor

i) Marriage Ministry

j) Other (*please describe*)

4. Please describe past training and experience in disaster response, grief, trauma or crisis intervention.

5. Please circle one or more below to best describe your ministry training or vocational experience.

- | | | | |
|----------------------|------|-------------------|--------------------------------|
| Police | Fire | Ambulance/Medical | Military |
| Christian Counsellor | | Pastor | Hospice Worker |
| Chaplain | | Ministry Leader | Trained in Crisis Intervention |

6. Do you have any physical, emotional or medical limitations that would hinder your involvement or mobility on a disaster site? _____ If Yes please give details.

7. Please indicated below the conditions or situations which would be acceptable to you in a deployment.

- | | | |
|--|----------------------|----------|
| Climb Stairs | | Yes / No |
| Sleep on a Camp Bed | | Yes / No |
| Physically handle/lift 10 kilos | | Yes / No |
| Work/live with no electricity | | Yes / No |
| Work up to 14 hours per day | | Yes / No |
| Extended times standing or walking | | Yes / No |
| Assist with daily chores (cleaning, laundry etc) | | Yes / No |
| Extreme weather conditions | (below 4 degrees C) | Yes / No |
| | (above 30 degrees C) | Yes / No |

8. On the scale below, please circle the number that best describes your comfort level to share

God's love and comfort with others.

- 1 2 3 4 5 6 7 8 9 10
Not Comfortable Very comfortable

2. Name: _____
Relationship: _____
Address: _____

Town/City: _____ Post Code: _____
Phone (Home) _____ Mobile: _____
E Mail: _____

16. Please describe below any crisis or time of grief you have personally experienced in the past 24 months
(please attach separate page if required)

17. Please provide a personal statement of your salvation experience in the Lord Jesus Christ.

18. Please describe how you have grown spiritually since your decision to follow Jesus Christ.
(please attach separate sheet if req'd)

By applying for consideration as a Volunteer for the Rapid Response Team of the Billy Graham Evangelist Association (BGEA), I acknowledge my understanding and agreement that the selection of volunteer staff is at the sole discretion of BGEA based on its assessment of the overall qualifications, skills and experience of the individual volunteer applicants and BGEA's ministry requirements.

Upon submission of this application to become part of the Rapid Response Team as a Volunteer Chaplain, you agree if appointed to adopt the BGEA's statement of faith of which you should have received a copy (please contact us if not). By applying you give consent for your personal information being held on the BGEA computer system that is subject to the following data protection statement.

Data Protection Act 1998. BGEA will only use personal data in connection with its charitable and RRT purposes. It only makes personal data available to other specifically partnered or associated organisations or individuals in the interest of our core business.

Signature of Applicant _____

Date _____

(Please sign only after completion and as a full agreement with the information and detail on this form.)

If you are visiting the UK from outside the EU/EEA and wish to volunteer for us you should first ensure that you have the correct visa/entry clearance to volunteer and check to see if there is a restriction on the number of hours you can volunteer for. If you are not sure if your visa does allow you to volunteer then you should first contact the UK Border Agency before applying to volunteer with us. If your visitor's visa says you should not take up paid or unpaid work then we are sorry but you will not be able to become a volunteer with us.

Please post or email THIS COMPLETED APPLICATION TO:
Billy Graham Evangelistic Association, Rapid Response Team, Victoria House, Victoria Rd,
Buckhurst Hill, Essex IG9 5EX email: info@bgea.co.uk

