



# AIM Application

**Foreign Missions Division**  
 United Pentecostal Church International  
 8855 Dunn Road  
 Hazelwood, Missouri 63042-2299  
 fmdaim@upci.org

**NOTE: A \$100 non-refundable fee must accompany this application.**

NAME \_\_\_\_\_

(Please print or type.)

DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

(HIS) (HERS)

SOCIAL INSURANCE # \_\_\_\_\_

(Canadian Applicants Only) (HIS) (HERS)

DEPENDENT CHILDREN (AGE) \_\_\_\_\_ ( ) \_\_\_\_\_ ( )

\_\_\_\_\_ ( ) \_\_\_\_\_ ( )

ARE YOU A LICENSED MINISTER WITH UPCI? \_\_\_\_\_ MINISTERIAL # \_\_\_\_\_

MINISTERIAL STATUS \_\_\_\_\_

(LEVEL OF LICENSE)

(DISTRICT)

PASTOR'S NAME \_\_\_\_\_

PLEASE ATTACH A RECENT PHOTO OF YOURSELF.

***TYPE OF APPROVAL REQUESTED:***

- A. Missionary Associate who is fully self-supporting
- B. Missionary Associate needing to raise partial support
- C. Overseas Evangelist, either self-supporting or needing to raise support
- D. Member of a missionary family needing to raise support
- E. Bible college student desiring to spend a period of time abroad
- F. Missionary furlough replacement desiring to spend a period of time abroad

1. Have you and your spouse ever been separated? Have you ever been divorced?  
If so, explain: \_\_\_\_\_  
\_\_\_\_\_
2. Have you or your spouse ever backslidden after coming to the knowledge of the Acts 2:38 truth? \_\_\_\_  
If so, explain: \_\_\_\_\_
3. How long have you been personally supporting the Foreign Missions ministry in prayer and finance? \_
4. Where do you feel led to go? Be specific and list your preferences in order. A. \_\_\_\_\_  
B. \_\_\_\_\_ C. \_\_\_\_\_
5. How long do you plan to remain on the field? \_\_\_\_\_
6. When do you wish to depart for the field? (Month/Year) \_\_\_\_\_
7. Have you ever visited a foreign country? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_  
Why? \_\_\_\_\_
8. In what way do you feel you would like to be involved in the country to which you are applying to go? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. What is your objective in going? \_\_\_\_\_  
\_\_\_\_\_
10. What skills or natural abilities do you possess that you feel might be useful on the field? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Have you studied any languages other than English? \_\_\_\_\_ If so, what? \_\_\_\_\_  
What is your level of fluency? \_\_\_\_\_
12. What amount of your personal funds will you use to finance your trip? \_\_\_\_\_
13. What other sources of assistance do you propose to help finance your tour?  
\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_
14. Have you or your spouse ever been convicted of or pleaded guilty to child abuse or a crime involving actual or attempted sexual molestation of a minor? If so, please explain. (Attach a separate page if necessary.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. Have you or your spouse ever been convicted of or pleaded guilty to a crime other than traffic violations? If yes, please explain. (Attach a separate page, if necessary.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Have you ever declared bankruptcy? \_\_\_\_\_ When \_\_\_\_\_
17. Do you personally know anyone on the mission field right now and especially where you are applying to go? Have you written anyone on the field or in any way made contact expressing your desire to personally be involved in missions? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
18. Please list three personal references other than your family or your pastor:
- A. Name and address: \_\_\_\_\_  
 \_\_\_\_\_
- B. Name and address: \_\_\_\_\_  
 \_\_\_\_\_
- C. Name and address: \_\_\_\_\_  
 \_\_\_\_\_
19. Additional information needed:  
 On an attached sheet give a resume of yourself (and family if married).
- |                                      |  |
|--------------------------------------|--|
| 1. Spiritual status                  | 4. Occupation                                |
| 2. Physical condition                | 5. Education background                      |
| 3. Financial condition (debts, etc.) | 6. Describe your interests, burdens, talents |
20. If you **ARE** a licensed UPCI minister, please ask your district superintendent for a letter of recommendation.
21. If you **ARE NOT** a licensed UPCI minister, please secure a letter of recommendation from your pastor.

**NOTES**

1. This application cannot be processed for approval until Foreign Missions Division has received all necessary recommendation letters and pertinent details and has fully compiled your file. This usually requires two to three months or more in some cases.
2. Foreign Missions policy requires the following before an approved AIMer can depart for the field.
  - ◆ You must have your airline tickets in hand plus 50% of the budget needed while on the field must be on deposit and the balance of money be fully pledged or . . .
  - ◆ A church and pastor must provide your entire budget and have completed a support guarantee form and returned it to Foreign Missions Division or . . .
  - ◆ An AIMer must be totally self-supporting, needing no financial assistance and have confirmation of this in the AIM applicant's file with Foreign Missions Division
3. A \$100 non-refundable processing fee must accompany this application to help defer processing costs.

*STATEMENT OF FAITH:*

Our basic and fundamental doctrine is the Bible standard of full salvation, which is repentance, baptism in water by immersion in the name of the Lord Jesus Christ for the remission of sins, and the baptism of the Holy Spirit with the initial sign of speaking with other tongues as the Spirit gives utterance.

*APPLICANT'S STATEMENT:*

The information contained in this application is correct to the best of my knowledge. I understand and agree that Foreign Missions Division may conduct a background check relative to questions in this application to determine my character and fitness for overseas assignment. I agree not to seek damages from any person, church or organization on account of compliance with this agreement and authorization.

I understand that any information provided to Foreign Missions Division will remain confidential, and I therefore waive any right that I may have to examine this confidential information. Moreover, if Foreign Missions Division deems it necessary, I authorize a credit check and/or criminal record check.

In consideration of the receipt and evaluation of this application, I agree to this background check as stated above by my signature on this application.

I further acknowledge that the foregoing and accompanying information is accurate and that if my approval is granted, I hereby agree that:

1. I will do my best to work in complete harmony under the supervision of the missionary or national leader to whom I am assigned and will accept and perform to the best of my ability whatever tasks or endeavors they assign to me.
2. I will be under the jurisdiction of the Foreign Missions Division at all times. This includes the Field Superintendent and Regional Director.
3. I will work in harmony with the United Pentecostal Church International and its missionary program and policies at all times.
4. I will cooperate with all requests made of me both by my assigned missionary and the Foreign Missions Division.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Your Pastor

## Insurance Waiver

Whereas, I have voluntarily requested approval from Foreign Missions Division of the United Pentecostal Church International to serve the church outside of the territorial limits of the United States of America, and

Whereas, my request is made with the understanding that in the event of the issuance of such approval the United Pentecostal Church International shall not be expected or required to furnish my life, health or accident insurance for the benefit of me, my heirs or my estate during, in connection with or as a result of any service which I might render in behalf of said church, and whereas, I understand that any such foreign service in behalf of the church might disqualify me from receiving certain medical insurance benefits to which I might otherwise be entitled under the laws of the United States or any state thereof, and

Whereas, Foreign Missions Division has expressed a desire that I should confirm my understanding of the foregoing premises as a condition to its approval of me for any such foreign service.

Now, therefore, in consideration of the premises, I hereby agree that in the event Foreign Missions Division of the United Pentecostal Church International shall approve me for service in behalf of said church outside of the territorial limits of the United States of America, the said church shall not be liable to me for any loss, damage or injury suffered by me, either directly or indirectly, in connection with, arising out of, incident to or as a result of my service in behalf of said church, and I hereby waive any right, claim, demand or cause of action against the said United Pentecostal Church International by reason of any injury, loss, damage, expense, cost, judgment, attorneys' fees and other costs incurred or suffered by me in connection with, arising out of, incident to as a result of my service in behalf of said church. This Waiver is and shall be binding upon me, my legal representatives and the legal representatives of my estate, my heirs and assigns.

In witness whereof, I have signed this Insurance Waiver in the county/parish of \_\_\_\_\_, State/Province of \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature

Witness:  
\_\_\_\_\_  
Signature

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*Please complete two of these forms and submit one of them with your completed AIM application. You may retain the other copy for your own records.*