



# APPLICATION FOR RAIN - IAHM



1. Attach a CURRENT PHOTO. (Head shot only.)  
If you and your spouse are both applying, two separate applications must be completed and individual photographs attached. Please also submit a photo together.
2. Please TYPE or PRINT clearly. If the question does not apply to you, please mark N/A for Not applicable.

**PLEASE ATTACH  
A CURRENT PHOTO  
HERE**

## A. PERSONAL DATA Please Type or print full legal name

NAME (Last) (First) (Middle) (Maiden Name)

PRESENT STREET ADDRESS City State/Zip Country

( ) ( )

Home Phone Cell Phone E-Mail Address

Social Security Number Male/Female Age US Citizen Country of Citizenship

(If permanent resident alien, please enclose a copy of green card.)

Marital Status: \_\_\_\_\_ Engaged:\* \_\_\_\_\_ Married: \_\_\_\_\_ Single: \_\_\_\_\_ Widowed: \_\_\_\_\_ Separated: \_\_\_\_\_

Proposed Marriage Date: \_\_\_/\_\_\_/\_\_\_ If married, is your spouse in agreement with you going on this trip? \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Passport Number: \_\_\_\_\_ Name as on Passport \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## B. TRIP INFORMATION

Proposed Dates of Trip: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ Destination: \_\_\_\_\_

Trip Leader: \_\_\_\_\_ Phone: \_\_\_\_\_

Purpose of trip: \_\_\_\_\_

Number of people going: \_\_\_\_\_ Mode of Transportation: \_\_\_\_\_

Where will you be staying? \_\_\_\_\_

### LANGUAGE

Primary Language of Destination: \_\_\_\_\_ What is your primary language? \_\_\_\_\_

What other languages do you speak? \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Do you have the ability to communicate with the people where you will be ministering? \_\_\_\_\_

Are you proficient enough in that language to interpret? \_\_\_\_\_ One on one? \_\_\_\_\_ for Speakers? \_\_\_\_\_

Are you willing to learn basic phrases in the language where we are going. \_\_\_\_\_

### C. YOUR SPIRITUAL LIFE

Date you committed your life to Christ \_\_\_\_/\_\_\_\_/\_\_\_\_ Were you Raised in a Christian Home? \_\_\_\_\_

Briefly relate your conversion experience \_\_\_\_\_

Were you baptized by immersion? (Believer's baptism) \_\_\_\_\_ When? \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you been Baptized in the Holy Spirit? \_\_\_\_ When? \_\_\_\_/\_\_\_\_/\_\_\_\_ What is the evidence in your life that you have received the Baptism in the Holy Spirit? \_\_\_\_\_

Do you attend church regularly? \_\_\_\_\_ Are you a member in good standing? \_\_\_\_\_ Do you serve regularly in a place of committed ministry in your local church? \_\_\_\_\_ Where? \_\_\_\_\_ How Often? \_\_\_\_\_

Do you read and study the Word of God regularly? \_\_\_\_\_ How often? \_\_\_\_\_

Describe your prayer life \_\_\_\_\_

Do you minister on a regular basis to others? \_\_\_\_\_

Have you had any training for ministry? \_\_\_\_\_ What/where? \_\_\_\_\_

What are your strong points? \_\_\_\_\_

What are your weak points? \_\_\_\_\_

Do you play a musical instrument? \_\_\_\_\_ Do you have the ability to Lead Worship? \_\_\_\_\_

Do you have any special talents or gifts that you could utilize for the ministry? \_\_\_\_\_

### C. BEHAVIOR & CHARACTER:

Those who are sent out in ministry must maintain the highest ethical standards. Do you feel that there is any area in your personal life that would hinder your freedom to minister at this time? Yes \_\_\_\_ No \_\_\_\_

Have you ever been convicted of a felony or spent time in jail or prison? Yes \_\_\_\_ No \_\_\_\_ If yes, please explain on a separate sheet of paper

Please give yourself an honest evaluation in these areas of behavior and character:

	Above Average	Average	Below Average	Not Sure
1. Leadership	_____	_____	_____	_____
2. Responsibility	_____	_____	_____	_____
3. Christian Commitment	_____	_____	_____	_____
4. Ability to Communicate	_____	_____	_____	_____
Scriptural truth	_____	_____	_____	_____
5. Moral Character	_____	_____	_____	_____
6. Integrity/Honesty	_____	_____	_____	_____
7. Emotional Stability	_____	_____	_____	_____
8. Ability to get along with others	_____	_____	_____	_____
9. Personal Appearance	_____	_____	_____	_____
10. Sense of Appropriateness	_____	_____	_____	_____
11. Teachability	_____	_____	_____	_____
12. Ability to listen	_____	_____	_____	_____
13. Willingness to submit to leadership	_____	_____	_____	_____

### D. MEDICAL:

It is necessary on a Missions Trip that you be in good health, first because ministry is very rigorous, and second medical care and fully stocked pharmacy's are not always readily available. If you are taking medication, make sure that you have enough for the trip and at least 5 beyond. Do not pack it in checked baggage, but put it in your carry-on, and bring a list of all of the meds that you take. Do you have any health, or physical limitations that will need special care during the trip. Please describe. \_\_\_\_\_

Do you have any medical conditions that you are under a Doctors care for? \_\_\_\_ What? \_\_\_\_\_

Have you ever been under a doctors care for depression or mental illness? \_\_\_\_ Are you presently? \_\_\_\_ Are you presently taking medication for depression, sleep, or mental illness? \_\_\_\_\_

## E. COMMITMENT:

---

It is a privilege for us to minister in other churches, in other cities, and in other nations. There are different modes of dress, of customs, and different protocols for each place, and for each inviting ministry. If you are chosen to be on the team, we will have team meetings to tell you what those things are in the place that you are going, and once there you will have a time of orientation. You would do well to read as much as possible about the Peoples of the land, the Church, the City or the Nation that you are going to, and check out maps to get a good lay of the land. If there is another language spoken there, you need to be willing to learn at least a few phrases in order to be more confident, and open to the people there. You are going as part of a team representing **RAIN and/or the International Association of Healing Ministries**, and the ministry that has invited us. ***You are not representing your own ministry.*** Please refrain from making connections with pastors or leaders for future ministry on your own. That would be a serious breach of ministerial ethics. Make friends, but be very careful about giving personal contact information, or you may find yourself with unexpected guests arriving at your door, or soliciting you for financial help. If you do want to stay connected, we suggest Facebook. The only address and phone number that you are free to give are RAIN's. Letters or E-mails that come to the RAIN Office will be forwarded to you.

It is very important that we all operate as a team, and just as we as RAIN leaders submit to the leaders in the place that we are going, so each team member must be in submission to the Team Leaders, and be flexible, cooperative, and willing to serve in practical helps as well as teaching, preaching, interceding, and personal/altar ministry.

## F. FUND RAISING:

---

Please check with your trip Leader, and make sure that you know the full cost of the trip and financial deadlines. Each participant is responsible to make all payments on time, or you may be dropped from the team.

How much of your personal funds; income, or savings will you be using? \$ \_\_\_\_\_

How much of your funds will you have to raise? \$ \_\_\_\_\_

Will your local Church contribute to you trip or help you with a fund raiser? \$ \_\_\_\_\_

(Many times if your Pastor sees that you are personally investing 30—50% and that you are willing to raise additional finances from friends, family, and co-workers, then they may help you go to the Missions Committee to ask for funds or permission to put on a fundraiser at the church. Carwashes, Auctions, garage sales, bake sales, and dinners are only some of the ways that you can raise funds for your missions trip. You can also sell some of your possessions on Craig's List or E-Bay)

\$ \_\_\_\_\_ TOTAL

Please list ways that you will raise funds for this Missions Trip:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

We provide a sample fund raising letter for you to use to appeal to you Friends, Family, and co-workers for Prayer and Financial Support. People receive so many solicitations by phone, mail, and e-mails, and may just set your request aside. You would be wise in following up your letter with a personal call 5 to 7 days after they receive your letter. You can ask asking if they received your letter, and let them know your progress. Then you can let them know how much it would mean to you to have them praying for you. Then thank them for their time, and ask Them if they will be able to help you to go with a donation. Make sure that you write a report and enclose pictures to send as a "Thank You" to all your supporters!

## G. USING YOUR GIFTS

---

### WORSHIP:

Do you have experience singing on a Worship Team or in a Choir? \_\_\_\_\_

What Vocal Part do you usually sing?    Soprano      Alto      Tenor      Baritone      Bass

Do you have Experience Leading Worship? \_\_\_\_\_ Where? \_\_\_\_\_ How Long? \_\_\_\_\_

Would you be willing to lead worship for team devotions? \_\_\_\_\_ Would you be willing to lead worship for a Service? \_\_\_\_\_

Would you be willing to make up Lyric Sheets and run copies for Team Devotions? \_\_\_\_\_

Are you a Soloist? \_\_\_\_\_ Are you willing to sing a Solo Where do you think your ability is best used? \_\_\_\_\_

Do you play an instrument? \_\_\_\_\_ What? \_\_\_\_\_ Will you be bringing your instrument? \_\_\_\_\_

Are you a Worship Dancer? \_\_\_\_\_ Would you like to do a dance for our Outreach? \_\_\_\_\_

## H. TALENTS & GIFTS

---

Do you have a talent or gift that you would like to share? \_\_\_\_\_ What is it? And where do you feel it would be best used? (ie: Crafts, Ice Breaker activities, Make Gifts to give to our Hosts, or to Those we minister to. Please list and explain

---

---

---

## I. MINISTRY TRAINING AND EXPERIENCE

---

In what areas of ministry have you had training? What kind of training & where?

Intercession \_\_\_\_\_

Evangelism \_\_\_\_\_

Preaching \_\_\_\_\_

Teaching \_\_\_\_\_

Healing Prayer \_\_\_\_\_

Sozo \_\_\_\_\_

Elijah House \_\_\_\_\_

Inner Healing \_\_\_\_\_

Deliverance \_\_\_\_\_

Prophetic Ministry \_\_\_\_\_

## J. YOUR REASON FOR APPLYING FOR THIS TRIP:

---

Please write your reason that you feel called to go on this Missions Trip on a separate sheet of paper and submit it with your completed application, and your deposit.

Give your **PERSONAL RECOMMENDATION** (Pages 5 &6) form to someone who knows you well, and your **PASTORAL RECOMMENDATION (PAGES 7 &8)** to your Pastor, in an addressed and stamped envelope to: **RAIN Global Missions, PO Box 1416, Maple Grove, MN 55311** and ask them to get them back to RAIN as soon as possible for this Missions Trip..

## MY PERSONAL COMMITMENT:

---

I am willing to submit to those over me in the Lord on this trip, and also to do my best to get along with the whole team. I will be financially responsible for all of my own expenses, and depart myself in a way that honors the Lord Jesus Christ, the inviting ministry and RAIN. Signed: \_\_\_\_\_

Date: \_\_\_\_\_



# RESURRECTION APOSTOLIC INTERNATIONAL NETWORK

*Apostolic Team Care: Uniting, Igniting, Releasing, Empowering, & Undergirding  
THE CHURCH OF THE THIRD MILLENIUM*



## RAIN—IAHM MISSIONS TRIP PASTORAL RECOMMENDATION

Applicant, please give this Pastoral Recommendation form to your Pastor in a stamped addressed envelope and have him/her mail it directly to RAIN at the address below.

Name of applicant: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Maiden Name) \_\_\_\_\_

Present Address (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State/Zip) \_\_\_\_\_ (Country) \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Name of Church or Ministry \_\_\_\_\_

Your name has been given by the \_\_\_\_\_ as a Pastoral reference for the above named person who is applying to be part of a RAIN Missions Team to; \_\_\_\_\_ on these dates; \_\_\_\_/\_\_\_\_/\_\_\_\_  
Serious consideration will be given to your evaluation; therefore we ask you to carefully complete this form. Please return it directly to the RAIN office at the address listed below. Please be assured that your comments will be held in strictest confidence.

1. How long have you known the applicant? \_\_\_\_\_ Years, \_\_\_\_\_ Months
2. How well do you know the applicant? (Check one)
  - By name/sight  Fairly well/ numerous contacts
  - Casually—Few personal contacts  Very well/ close personal relationship

Comments: \_\_\_\_\_  
\_\_\_\_\_

3. Please give your knowledge of the applicants involvement in church activities. (Check one)
  - Attends irregularly/shows little interest  Cooperative, usually willing to help
  - Seldom Participates, but attends regularly  Enthusiastic and deeply involved in service

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Please Mail your completed recommendation to: RAIN Global Missions—PO Box 386475, Bloomington MN 55438**

**AN APOSTOLIC MOVEMENT OF PASTORS, CHURCHES, TRANS-LOCAL MINISTRIES, AND MISSIONARIES**  
*Who are powerfully advancing God's Kingdom in more than 100 Nations!*  
Jim Rickard, Apostle & Founder PO Box 386475, Bloomington MN 55438  
Phone: 763-566-7411 E-Mail: maryg@rainministries.org / ramona@rainministries.org Web: www.rainministries.org

**PASTORAL RECOMMENDATION (Continued)**

---

4. Give what you consider the applicant's strong points.

\_\_\_\_\_

\_\_\_\_\_

5. Give what you consider to be the applicant's weak points.

\_\_\_\_\_

\_\_\_\_\_

6. Please give an honest evaluation in these areas of the applicant's abilities, behavior, and character:

	Above Average	Average	Below Average	Not Sure
a. Leadership	_____	_____	_____	_____
b. Responsibility	_____	_____	_____	_____
c. Christian Commitment	_____	_____	_____	_____
d. Ability to Communicate				
Scriptural truth	_____	_____	_____	_____
e. Moral Character	_____	_____	_____	_____
f. Integrity/Honesty	_____	_____	_____	_____
g. Emotional Stability	_____	_____	_____	_____
h. Ability to get along with others	_____	_____	_____	_____
i. Personal Appearance	_____	_____	_____	_____
j. Sense of Appropriateness	_____	_____	_____	_____
k. Teachability	_____	_____	_____	_____
l. Ability to listen	_____	_____	_____	_____
m. Willingness to submit to leadership	_____	_____	_____	_____

7. Does the applicant have any personality traits which impair his/her relationship with others?

\_\_\_\_\_

\_\_\_\_\_

8. Please share with us any information that you may know about the applicant that would help in our evaluation for being a member of the Missions Team. On a missions trip one is sometimes subjected to the strain of airports, long travel times, sleep deprivation, strange foods, and 24/7 sharing bedroom, bathroom, and living space with others. While we do try to make our trips as special as possible, flexibility, patience, forbearance, and love, with a cheerful attitude go a long way in the success of a trip. The demands of ministry in another church, city or nation can be very great.

\_\_\_\_\_

\_\_\_\_\_

9. To the best of your knowledge, would you recommend this person to be a member of this ministry team at this time?

\_\_\_ Highly Recommend      \_\_\_ Recommend      \_\_\_ Recommend w/Reservations      \_\_\_ Not Recommend

---

**Thank you, We appreciate your kind assistance.**

**Your recommendations will be kept in the strictest confidence.**

Your Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_\_\_ Signature: \_\_\_\_\_



# RESURRECTION APOSTOLIC INTERNATIONAL NETWORK

*Apostolic Team Care: Uniting, Igniting, Releasing, Empowering, & Undergirding  
THE CHURCH OF THE THIRD MILLENIUM*



## RAIN MISSIONS TRIP PERSONAL RECOMMENDATION

Applicant, please give this Pastoral Recommendation form to your Pastor in a stamped addressed envelope and have him/her mail it directly to RAIN at the address below.

Name of applicant: (Last)	(First)	(Middle)	(Maiden Name)
Present Address (Street)	(City)	(State/Zip)	(Country)
Home Phone	Cell Phone	E-Mail Address	

Name of Church or Ministry

Your name has been given by the as a Personal Reference for the above named person who is applying to be part of a RAIN Missions Team to; \_\_\_\_\_ on these dates; \_\_\_/\_\_\_/\_\_\_\_\_  
Your input is valued and serious consideration will be given to your evaluation; therefore we ask you to carefully complete this form. Please return it directly to the RAIN office at the address listed below. Please be assured that your comments will be held in strictest confidence.

1. How long have you known the applicant? \_\_\_\_\_ Years, \_\_\_\_\_ Months
2. How well do you know the applicant? (Check one)
 

<input type="checkbox"/> By name/sight	<input type="checkbox"/> Fairly well/ numerous contacts
<input type="checkbox"/> Casually—Few personal contacts	<input type="checkbox"/> Very well/ close personal relationship

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please give your knowledge of the applicants involvement in church activities. (Check one)
 

<input type="checkbox"/> Attends irregularly/shows little interest	<input type="checkbox"/> Cooperative, usually willing to help
<input type="checkbox"/> Seldom Participates, but attends regularly	<input type="checkbox"/> Enthusiastic and deeply involved in service

Comments:

\_\_\_\_\_  
\_\_\_\_\_

**Please Mail you completed recommendation to: RAIN Global Missions—PO Box 386475, Bloomington MN 55438**

**AN APOSTOLIC MOVEMENT OF PASTORS, CHURCHES, TRANS-LOCAL MINISTRIES, AND MISSIONARIES**  
*Who are powerfully advancing God's Kingdom in more than 100 Nations!*

Jim Rickard, Apostle & Founder PO Box 386475, Bloomington MN 55438 Phone: 763-566-7411/411  
E-Mail: maryg@rainministries.org / ramona@rainministries.org Web: www.rainministries.org

**PERSONAL RECOMMENDATION (Continued)**

4. Give what you consider the applicant's strong points.

\_\_\_\_\_

\_\_\_\_\_

5. Give what you consider to be the applicant's weak points.

\_\_\_\_\_

\_\_\_\_\_

6. Please give an honest evaluation in these areas of the applicant's abilities, behavior, and character:

	Above Average	Average	Below Average	Not Sure
a. Leadership	_____	_____	_____	_____
b. Responsibility	_____	_____	_____	_____
c. Christian Commitment	_____	_____	_____	_____
d. Ability to Communicate	_____	_____	_____	_____
Scriptural truth	_____	_____	_____	_____
e. Moral Character	_____	_____	_____	_____
f. Integrity/Honesty	_____	_____	_____	_____
g. Emotional Stability	_____	_____	_____	_____
h. Ability to get along with others	_____	_____	_____	_____
i. Personal Appearance	_____	_____	_____	_____
j. Sense of Appropriateness	_____	_____	_____	_____
k. Teachability	_____	_____	_____	_____
l. Ability to listen	_____	_____	_____	_____
m. Willingness to submit to leadership	_____	_____	_____	_____

7. Does the applicant have any personality traits which impair his/her relationship with others?

\_\_\_\_\_

\_\_\_\_\_

8. Please share with us any information that you may know about the applicant that would help in our evaluation for being a member of the Missions Team. On a missions trip one is sometimes subjected to the strain of airports, long travel times, sleep deprivation, strange foods, and 24/7 sharing bedroom, bathroom, and living space with others. While we do try to make our trips as special as possible, flexibility, patience, forbearance, and love with a cheerful attitude go a long way in the success of a trip. The demands of ministry in another Church, City, or Nation can be great.

\_\_\_\_\_

\_\_\_\_\_

9. To the best of your knowledge, would you recommend this person to be a member of this ministry team at this time?

\_\_\_ Highly Recommend      \_\_\_ Recommend      \_\_\_ Recommend w/Reservations      \_\_\_ Not Recommend

**Thank you. We appreciate your kind assistance.**

**Your recommendations will be kept in the strictest confidence.**

Your Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_\_\_ Signature: \_\_\_\_\_