

**Chinese Christian Church of New Jersey**  
Youth/College Short Term Missions Application (Short Form\*)

Name: \_\_\_\_\_ Chinese Name: \_\_\_\_\_  
                    Last                      First                      Middle Initial

Application Date: \_\_\_\_\_ Mission Preference 1: \_\_\_\_\_ 2: \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone No: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

Permanent Address (if different): \_\_\_\_\_

Phone Number (if different) : (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: (Male  Female  )

Education: (High school  College  Graduate  Career  )

Major or anticipated major: \_\_\_\_\_

Current profession (if applicable) : \_\_\_\_\_

Are you a US Citizen? Yes \_\_\_\_ No \_\_\_\_

If not, what is your country of citizenship: \_\_\_\_\_

Does your VISA allow multiple entry into US? Yes \_\_\_\_ No \_\_\_\_

Are you a member of CCCNJ or do you attend service at CCCNJ regularly? Yes \_\_\_\_ No \_\_\_\_

If not, which church are you a member of : \_\_\_\_\_

Church Pastor/Advisors name: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_

**Prayer Support:**  Have you raised Prayer Support?

**Church Ministry:**

Where: \_\_\_\_\_

For how long: \_\_\_\_\_

At what capacity: \_\_\_\_\_

