



**United Methodist Volunteers in Mission**  
Oregon-Idaho Conference

Phone: 541.620.0989[c]  
or 541.701.0511[h]  
[umvim@umoi.org](mailto:umvim@umoi.org)  
[www.umoi.org/UMVIM](http://www.umoi.org/UMVIM)

**UMVIM TEAM LEADER APPLICATION**

Application Date:		Application Type: <input type="checkbox"/> Provisional <input type="checkbox"/> Full/Approved	
		Application Status: <input type="checkbox"/> New <input type="checkbox"/> Renewal	
<b>Name</b>		Birthdate	Gender
Address		Home Phone	
City	State	Zip	Cell Phone
Email			
Name of Home Church		Church Location	
Current Pastor		Current Pastor's Phone	
Time Associated with this Church:	If less than 6 months, prior Church/Location:		
Prior Pastor	Prior Pastor's Phone		
Prior Mission or Service Experience / Dates / Locations:			
Prior Leadership Experience (Mission or similar) / Dates / Locations:			
Do you have specific sites and/or types of projects in mind? Where/What?			

**Applicant's Request for Approval and Certification:**

The information in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give to the Oregon-Idaho Conference and its UMVIM Coordinator information that they may have regarding my character and fitness for Volunteers In Mission work. I release all such references from liability for any damage that may result from furnishing such evaluations and I waive any right that I may have to inspect references provided on my behalf. Should my application be accepted, I agree to be bound by the Oregon-Idaho United Methodist Volunteers In Mission guidelines and policies.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This section to be completed by Conference UMVIM Coordinator or Conference Coordinator of Mission and Ministry:**

Date and location of initial UMVIM Leader Training:	
Date and location of latest UMVIM Leader Refresher/Training Review:	
Date of latest Safe Sanctuaries Certification:	
Date and source of latest national criminal background check:	



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**UMVIM TEAM LEADER REFERENCE**

<b>Team Leader Applicant</b>	
Name of Church	Church Location
Pastor	Pastor's Phone

The person named above has applied to be an approved UMVIM Team Leader within the Oregon-Idaho Conference of the United Methodist Church. Please comment as you feel is appropriate on the following questions regarding this applicant's fitness for Christian service in this role, with special attention to areas of safety and Safe Sanctuaries.

How long have you known this applicant?
Does this applicant show good judgement and possess the ability to make decisions and follow through on them?
Does this applicant show a willingness to follow process and procedure, especially in regards to Safe Sanctuaries and team selection practices?
How does this applicant respond under pressure?
Are there any settings in which you would expect this candidate to excel or in which you would perhaps have reservations?
What is this applicant's attitude toward other cultural groups, races or nationalities?
Do you have any reason to lack confidence in this applicant as a potential UMVIM Team Leader?

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

Relationship to Applicant: \_\_\_\_\_