



SSJ Mission Corps

“One Year to Change a Life”

9701 Germantown Ave · Philadelphia, PA · 19118

Phone 215-248-7235 · Fax 215-248-7237 · ssjmissioncorps@gmail.com

APPLICATION FORM

(Please type or print clearly)

I. PERSONAL INFORMATION

Name: _____
Last First Middle

Name you prefer to be called: _____

Current Address: _____

City/State/Zip: _____

Phone: _____(Day) _____(Night) _____(Cell)

E-Mail: _____

Preferred Way to Reach you: _____ Best Time to Reach You: _____

Permanent Address (if different from above): _____

City/State/Zip: _____ Phone: () _____

Religious Denomination: _____

Sex: _____ Date of Birth: ____/____/____ Age: _____

Social Security Number: ____/____/____ Marital Status: _____

Citizen of _____ Driver License # and State: _____
Country

Mother's Name: _____

Address: _____ Phone: _____

City/State/Zip code: _____

Father's Name: _____

Address: _____ Phone: _____

City/State/Zip code: _____

In case of emergency, please contact: _____

Relationship: _____ Phone: _____

List Names and Ages of Siblings:

How did you hear about the SSJ Mission Corps?

Please list other opportunities you are pursuing besides SSJ Mission corps (eg. other volunteer programs, graduate schools, employment options, etc.) What is the present status of each application?

Are there any financial, family, or personal obligations/situations that would affect your commitment with the SSJ Mission Corps? (eg. loans, weddings, sick family members, graduate school, etc.) _____

If yes, please explain: _____

Please list anything else, which you have not yet disclosed, that might affect your ability to participate in any aspect of the SSJ Mission Corps Program – such as community life or performance of job-related functions:

Have you ever been convicted of a felony or a misdemeanor crime? _____

If yes, please explain: _____

II. HEALTH

Are there any medical conditions of which we should be aware?
(State any disabilities, restrictions, chronic illnesses, etc.)

Do you have any special dietary needs? If so, explain briefly:

Do you suffer from any allergies? If so, explain briefly:

Are you taking any medications? _____

If yes, please name the medications and the side effects: _____

Name the type of health insurance coverage you have: _____

Plan Name: _____ Group Number: _____

III. EDUCATION

Please list all schools attended beginning with the most recent:

Name & Location	Dates Attended	Major/Minor	Degrees or Certificates

IV. EXPERIENCES, ACTIVITIES, AND INTERESTS

List some of your talents, hobbies, recreation, leisure activities:

Do you play a musical instrument? If so, which one: _____

List Activities, Service Organizations and Programs that you have participated in, been given training, been a volunteer, or received awards:

Organization/Program

Your role

Dates: From-To

Please rank your top six preferences (1=most interested) of areas of work in which you are interested:

- | | |
|--------------------------|--------------------------|
| ___ Child Care | ___ Hispanic Ministry |
| ___ Community Organizing | ___ Immigrant Services |
| ___ Education | ___ Pastoral Ministry |
| ___ Elderly Outreach | ___ Music Ministry |
| ___ Food/Hunger Outreach | ___ Art Studio |
| ___ Teacher Aide | ___ Teen Services |
| ___ Social Services | ___ Neighborhood Centers |
| ___ Women's Issues | ___ Other _____ |

Are there any areas of service or populations that you would not be comfortable serving? Please list and explain why:

Languages other than English
(check in appropriate space: U-understand, S-speak, R-read, W-write)

	SPANISH				FRENCH				OTHER _____				OTHER _____			
	U	S	R	W	U	S	R	W	U	S	R	W	U	S	R	W
Limited																
Fairly Well																
Fluently																

Have you had any experience working with people of nationalities/cultures other than your own? Please explain (Please list any International travel, experience in community living, working with migrants, inner-city living and working, etc.)

V. WORK EXPERIENCE

Beginning with your current position, list your last four employers (*If you prefer, you may attach a copy of your resume instead of filling out this section*):

Employer's Name: _____

Address: _____

Dates of Employment- Start: _____ End: _____

Position and Job Duties: _____

Employer's Name: _____
Address: _____

Dates of Employment- Start: _____ End: _____
Position and Job Duties: _____

Employer's Name: _____
Address: _____

Dates of Employment- Start: _____ End: _____
Position and Job Duties: _____

Employer's Name: _____
Address: _____

Dates of Employment- Start: _____ End: _____
Position and Job Duties: _____

VI. REFERENCES

Please list the three people whom you have asked to be your references. These people should currently know you well, who can speak to your faith, character, and employment record. You must have one spiritual reference and the other two may be of your choosing (a teacher, an employer, a supervisor, a mentor, etc.) Do not include relatives.

Spiritual Reference:
Name: _____ Phone: () _____
Address: _____ City/State/Zip: _____
Relationship: _____

Your Choice 1:
Name: _____ Phone: () _____
Address: _____ City/State/Zip: _____
Relationship: _____

Your Choice 2:
Name: _____ Phone: () _____
Address: _____ City/State/Zip: _____
Relationship: _____

*****Please have each reference fill out and separately mail the reference form to the address listed on the form***

VII. YOUR THOUGHTS

We would like to get to know you and your personality a little more in order to make this process a fruitful experience. Please write an “essay” (4 pages minimum) including your responses to the next nine questions. Please answer all questions thoroughly and candidly. There are no right or wrong answers to these questions—we just want to know more about you as an applicant.

**Please type your answers on a separate sheet of paper*

1. Describe your motivations for applying to the SSJ Mission Corps program. What are past experiences that have led you to apply? What do you hope to accomplish/gain by being a SSJ Mission Corps volunteer?
2. The SSJ Mission Corps is based on 4 Core Values: Justice, Spirituality, Community, and Simple Living. Which of the SSJ Mission Corps four values do you feel most drawn to? Why?
3. What is your understanding of social justice? How does social justice relate to charity? What are your hopes, expectations, and apprehensions with working with the poor?
4. How have you developed a personal spirituality and how has it led you to apply for the SSJ Mission Corps? What have been your experiences of personal and communal prayer? What hopes and expectations do you have for sharing spiritually in a community of volunteers?
5. SSJ Mission Corps volunteers live in community sharing meals, prayers, chores, celebrations, and more. What is your understanding of intentional community living? What expectations and apprehensions might you have regarding community living?
6. What is your understanding of simple living? What do you foresee as the joys and/or challenges of living simply on a small monthly stipend (\$100/mo)? What changes in lifestyle would you have to make?
7. How do you deal with personal difficult/stressful situations? Do you prefer to talk with people, pray, journal, etc.? Please give an example
8. How do you deal with conflict? Please give an example of a time when you had a conflict with someone and how it was resolved.
9. If you have any additional information to share that you feel would be important for us to know, please use the space below.

VIII. PHOTO

Please attach a recent photo of yourself to the application (may also be sent through e-mail). This is great for getting to know you as an applicant and for identification purposes.

Attach Photo Here:



IX. SIGNATURE

I affirm that all information contained in this application is true, to the best of my knowledge

Date: _____ Signature: _____

Priority Deadline: March 1st, 2012

Send to:

Mail: Colleen O'Grady, Director
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Philadelphia, PA 19118-2694

E-mail: ssjmissioncorps@gmail.com

Fax: (215) 248-7237