



P.O. Box 873642, Wasilla, AK 99687 (410) 504-6409

www.kashabbatribes.com

APPLICATION INSTRUCTIONS

<p>Dear Applicant,</p> <p>Thank you for your interest in traveling with us as a Kashabba Tribe Ministries Team Member!</p> <p>Attached is an application along with various forms and releases that MUST be completed to ensure your acceptance as a Ministry Team Member.</p> <p>Your application cannot be processed until Kashabba Tribe Ministries has received all of these completed documents. The following is a table of documents that are required:</p>	Application	Deposit Form	Liability Release	Discipline Policy	Ministry Team Training	Pastor's Evaluation	Confidential Evaluation	Affidavit of Temporary Guardianship (If you are younger than 18 years of age)	Picture of Applicant
IF YOU ARE CURRENTLY A PAID, PASTORAL STAFF MEMBER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>
IF YOU ARE AN INDIVIDUAL ACCOMPANIED BY YOUR PASTOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
IF YOU ARE TRAVELING WITHOUT YOUR PASTOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
IF YOU HAVE TRAVELED BEFORE ON A KASHABBA TRIBE MINISTRIES TEAM	*	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

*Please call the office so we can update your information in our database.

As you can see, Kashabba Tribe Ministries asks for a fairly in-depth amount of information. Some information required may be rather personal to you, but reasonable considering the scope of such a ministry trip.

Often, the first time a team member can be personally encountered is at the airport, as the team gathers en route to the ministry location. Therefore, it is imperative that Kashabba Tribe Ministries has prior knowledge of each applicant's personal background before approval can be granted for team participation. Please be assured that all information provided is kept strictly confidential within the leadership of Kashabba Tribe Ministries.

Please fax application to 866-928-4129 and then send all completed forms to the Kashabba Tribe Ministries address below. A mandatory deposit reserves your space on the ministry trip pending review and approval of your application. Space is limited and on most trips, acceptance is based on a first come, first serve basis. If a deposit is not received with your application, your application will not be processed.

Please make checks or money orders payable to: Kashabba Tribe Ministries. A deposit can be made by PayPal at no extra service charge. However, if you choose to pay for the whole ministry trip by PayPal, an additional 4% service charge will apply. All payments must be paid in U.S. dollars.

A Kashabba Tribe Ministries representative will contact you by phone or email when your application is approved. Acceptance will be confirmed or denied within 2 weeks of receiving your application. Upon acceptance, you will receive a packet including information about trip preparation, obtaining a passport and/or visa, immunizations, etc. Please do not apply for a visa until you receive your acceptance packet.

If you experience any uncertainty during the application process, or if you have any questions, please call Kashabba Tribe Ministries at (410) 504-6409 or email us at Missions@kashabbatribe.com. You can also visit our homepage at www.kashabbatribe.com for any additional information. Testimonies of past trips can be read... just a bunch of sons and daughters being used by an awesome God.

We at Kashabba Tribe Ministries are excited about your desire to join us in bringing the kingdom of God to East Africa. May the Lord bless you and continue to give you guidance as you seek His will!

In His Service,

Peter Neuberger, President
Kashabba Tribe Ministries

MINISTRY TRIP AWARENESS

Ministry Teams

Each person on a ministry trip will be placed on a team with a team leader. These teams will consist of even distribution of people including a team leader and a team coordinator. Teams are formed randomly to encourage interaction by those who do not yet know one another.

Ministry Conditions

Some of the places and hotel conditions teams may encounter can seem primitive in comparison to what you are used to. The pace required on these trips can be rigorous, emotionally draining, and physically exhausting. Each team member must be able to stand through long days, continuing to function autonomously even under trying conditions. We ask that you be prepared "to run and not grow weary, to walk and not faint." On the other hand, the rewards of being instrumental in God pouring out His Spirit on His people are without measure!

Ministry Meetings

The key word is flexibility. Ministry meetings are often held in local churches, but sometimes are held in open-air arenas or large tents. Kashabba Tribe Ministries works side by side with local church and ministry leadership in submission to their authority. Meetings or mission objectives are subject to change at any time during a trip.

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MINISTRY TEAM APPLICATION

I AM APPLYING FOR ACCEPTANCE AS A KASHABBA TRIBE MINISTRIES TEAM MEMBER FOR:

DESTINATION (CITY, COUNTRY) _____ DATES _____

NAME _____ NICKNAME* _____
(EXACTLY AS IT APPEARS ON YOUR PASSPORT) NOTE: *ASTERISKED FIELDS WILL APPEAR ON NAMETAG

DATE OF BIRTH ___/___/___ GENDER Male Female OCCUPATION _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBERS

HOME (_____) _____ WORK (_____) _____

FAX (_____) _____ CELL (_____) _____

EMAIL _____ PASSPORT NUMBER _____

EMERGENCY CONTACT NAME _____

RELATIONSHIP _____ PHONE NUMBER (_____) _____

HAVE YOU PREVIOUSLY TRAVELED WITH KTM? Yes No IF SO, GIVE DATES _____

ARE YOU BORN AGAIN? Yes No Unsure ARE YOU SPIRIT-FILLED? Yes No Unsure

ARE YOU WILLING TO MINISTER CONSISTENT WITH KASHABBA TRIBE MINISTRIES GUIDELINES? Yes No

ARE YOU WILLING TO SUBMIT TO BEING MONITERED AND LOVINGLY CORRECTED IF NECESSARY? Yes No

IF MARRIED, DOES YOUR SPOUSE SUPPORT YOUR PARTICIPATION? Yes No SPOUSES NAME _____

DO YOU HAVE ANY PHYSICAL DISABILITY? Yes No IF SO, PLEASE DESCRIBE _____

HAVE YOU EVER BEEN TREATED FOR ANY MENTAL/EMOTIONAL CONDITION? Yes No IF SO, PLEASE DESCRIBE _____

PLEASE LIST ANY CONDITION THAT MAY LIMIT YOUR PARTICIPATION AND ANY MEDICATIONS YOU ARE CURRENTLY TAKING _____

PLEASE LIST ANY ALLERGIES TO FOOD, MEDICINE, ETC. _____

MEDICAL INSURANCE PROVIDER _____ POLICY # _____

PHONE (_____) _____ (IF POSSIBLE, OTHER THAN TOLL FREE NUMBER)

HOW WOULD YOU DESCRIBE YOUR TEMPERAMENT? _____

CHURCH NAME _____ DENOMINATION _____

CHURCH ADDRESS _____

CITY _____ STATE _____ ZIP _____

CHURCH PHONE (_____) _____ HOW LONG HAVE YOU ATTENDED? _____

NAME OF PASTOR _____ PHONE (_____) _____

DO YOU TITHE/GIVE REGULARLY? Yes No DO YOU ATTEND CHURCH REGULARLY? Yes No
HAVE YOU BEEN WATER BAPTIZED? Yes No HAVE YOU BEEN BAPTIZED IN THE HOLY SPIRIT? Yes No

HAVE YOU PREACHED OR TAUGHT BEFORE IN CHURCH SERVICES? Yes No
ARE YOU WILLING AND ABLE TO PREACH IN SUNDAY SERVICES IF OPPORTUNITY WARRANTS? Yes No

IN WHAT AREAS OF CHURCH LIFE ARE YOU CURRENTLY SERVING OR HAVE YOU SERVED IN THE PAST?

IS YOUR PRESENT INCOME DERIVED FROM BEING IN FULL TIME CHRISTIAN MINISTRY? Yes No

WHAT DO YOU BELIEVE ARE YOUR SPIRITUAL GIFTINGS? _____

HAVE YOU RECEIVED ANY MINISTRY TRAINING IN THE AREA OF HEALING? Yes No
IF SO, PLEASE DESCRIBE _____

HAVE YOU RECEIVED ANY OTHER CHRISTIAN MINISTRY TRAINING? Yes No
IF SO, PLEASE DESCRIBE _____

ARE YOU FLUENT IN ANY LANGUAGES OTHER THAN ENGLISH? Yes No
IF SO, NAME LANGUAGE(S) _____

I, _____, DECLARE THAT THE INFORMATION PROVIDED BY ME IN THIS APPLICATION IS TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE KASHABBA TRIBE MINISTRIES TO VERIFY ANY AND ALL INFORMATION PROVIDED ABOVE.

SIGNED: X _____ DATE ____/____/____

<p>KASHABBA TRIBE MINISTRIES P.O. BOX 873642 WASILLA, AK 99687 Phone: (410) 504-6409 Fax: 866-928-4129 Email: Missions@kashabbatribe.com</p>



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DEPOSIT FORM

PLEASE NOTE: YOUR APPLICATION FOR KASHABBA TRIBE MINISTRIES TEAM PARTICIPATION CAN NOT BE PROCESSED UNLESS THE DEPOSIT AMOUNT IS INCLUDED WITH THIS FORM.

I, _____, WISH TO BE CONSIDERED AS A KASHABBA TRIBE MINISTRIES TEAM MEMBER FOR:

DESTINATION (CITY, COUNTRY)

DATES

DEPOSIT AMOUNT INCLUDED:

\$ _____

(\$300 PER PERSON PER TRIP)

Make checks payable to: Kashabba Tribe Ministries. Your deposit can be made by PayPal at no extra charge. However, if you choose to pay the balance of trip by PayPal, an additional 4% charge will be applied. All payments must be made in U.S. Dollars. Please include a note that your payment is for trip if you give with PayPal.

CANCELLATION & REFUND POLICY

If you are not selected for a team, your deposit will be refunded in full. After your application has been processed, you may cancel up to 8 weeks prior to your departure date in order to receive a \$150 refund of this deposit. If for any reason, a team member cancels after 8 weeks prior to the departure date; the full deposit will be forfeited. Final payment must be received by the cut off date in order to avoid the \$200 late fee. If for some reason you cancel your trip within 5 weeks of your departure date or after we have paid for your air flights, you will not be refunded for your ticket price. However, it is often the case that the ticket can be reused in the future less a change fee (varies between \$100-\$300+). Also, you will forfeit your deposit and there will be an additional \$100 late cancellation penalty. In addition, you will not be refunded monies that Kashabba Tribe Ministries has paid out on your behalf to secure hotel, bus, and food service reservations. Any amount over and above the deposit, airline ticket, late cancellation fee, and reservation monies spent on your behalf will be refunded to you!

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MINISTRY TEAM TRAINING

IN ORDER TO PARTICIPATE IN ANY KASHABBA TRIBE MINISTRIES TRIP, ALL MINISTRY TEAM MEMBERS WILL BE EXPECTED TO COMPLETE ONE OF THE FOLLOWING OPTIONS. ALL OPTIONS MUST BE COMPLETED WITHIN TWO WEEKS BEFORE THE TRIP DEPARTURE DATE. PLEASE MARK ONE OF THE OPTIONS BELOW AND RETURN.

OPTION 1. I HAVE ATTENDED A FULL-TIME MINISTRY SCHOOL WITHIN THE REVIVAL ALLIANCE (BETHEL, TACF, GLOBAL AWAKENING, IRIS, H.I.M. OR BY A CHURCH/MINISTRY THAT IS A MEMBER OF THE APOSTOLIC NETWORK OF GLOBAL AWAKENING

SCHOOL HOSTED BY _____ APPROX. DATES _____

OPTION 2. I HAVE ATTENDED A MINISTRY TEAM TRAINING OR HEALING SCHOOL BY EITHER KASHABBA TRIBE MINISTRIES OR ALSO THROUGH GLOBAL AWAKENING

TRAINING TAUGHT BY _____ APPROX. DATE _____

OPTION 3. SCHEDULE A KASHABBA TRIBE MINISTRIES REPRESENTATIVE TO PROVIDE A MINISTRY TRAINING IN YOUR AREA AND ATTEND THE TRAINING! YOU MAY EMAIL ONE OF THE FOLLOWING KTM TEAM MEMBERS TO COORDINATE:

- | | |
|---------------------------------|---------------------------|
| Doug Johnson (East Coast) | kashabba@gmail.com |
| Peter Neuberger (USA, Tanzania) | Peter@kashabbatribe.com |
| Ruben Reyes (Alaska) | Ruben@northgatealaska.com |

OPTION 4. AS A MEMBER OF THE APOSTOLIC NETWORK OF GLOBAL AWAKENING, WE RECOMMEND ORDERING THE FOLLOWING CD'S AND TRAINING MANUAL BY CALLING GLOBAL AWAKENING PUBLISHING (717) 796-9866 OR VISIT THEIR ONLINE BOOKSTORE AT www.globalawakening.com. PLEASE CALL THE KASHABBA TRIBE MINISTRIES OFFICE (410) 504-6409 WHEN YOU COMPLETE THE FOLLOWING (PRICES ARE SUBJECT TO CHANGE):

- A. Global Awakening Ministry Training Manual by Randy Clark \$20.00
- B. Biblical Basis For Healing & Words of Knowledge CD Series by Randy Clark \$14.00
- C. Deliverance CD Series by Pablo Bottari \$14.00
- D. Healing/Deliverance Prayer Card \$3.00

I UNDERSTAND THAT I AM RESPONSIBLE TO COMPLETE THE MINISTRY TRAINING OPTION CHOSEN ABOVE, WITHIN TWO WEEKS OF THE MINISTRY TRIP DEPARTURE DATE.

SIGNED: X _____ DATE ____/____/____

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LIABILITY RELEASE

WARNING: THIS IS A COMPLETE RELEASE OF ANY POTENTIAL CLAIMS.

I, _____, **IN CONSIDERATION OF MY BEING
ACCEPTED BY KASHABBA TRIBE MINISTRIES FOR PARTICIPATION AS A MINISTRY TEAM MEMBER**

FOR _____
DESTINATION (CITY, COUNTRY) DATES

HEREBY DECLARE:

I am 18 years of age or older. (If not yet 18, both youth and parents must initial and sign).

I am in good health and have received all vaccinations recommended by my county or state health department for travel in the countries or areas to be visited on this trip.

I acknowledge that International travel involves danger and risk. I acknowledge that the dangers and risks include, but not limited to, the hazards of travel by air, boat, raft, jeep, automobile, bus, taxi, bicycle, and on foot, travel in foreign countries, in jungles, mountains, high altitudes, steep terrain; travel and/or attendance at meetings among possibly unfriendly persons; malaria, sickness or injury in areas where medical assistance may be primitive or inadequate, unavailable or not readily available, and/or where rapid evacuation is not available; or where there is exposure to crime, to civil unrest and to forces of nature or other dangers. I understand that the above and other possibilities are risks in ministry/missions travel.

I acknowledge that Kashabba Tribe Ministries does not accept any responsibility for injury, illness or loss suffered by me, and that all medical or personal expenses in connection with or made necessary by my illness or injury on this trip are my own responsibility.

I acknowledge that Kashabba Tribe Ministries does not carry any insurance as noted in the acceptance letter, and I acknowledge that Kashabba Tribe Ministries has advised me that Kashabba Tribe Ministries does not accept any responsibility for any injury, loss or damage not covered by the above-mentioned insurance. I further acknowledge that Kashabba Tribe Ministries has recommended that I carry or obtain primary medical insurance to cover possible additional medical needs, especially related to previously existing medical conditions.

I hereby assume all risk of personal injury, sickness, or death, and damage to or loss of my personal property, and any delay, change or cancellation of travel arrangements, and any and all other damage or expenses I may suffer as a result of participation in this ministry/mission trip or in activities related to it. I agree to be fully responsible for my actions. Should I become ill or injured or suffer other damage, I will pay all costs involved including costs of evacuation and medical care I might receive.

Please carefully read and sign the other side of this page

IN CONSIDERATION OF MY BEING PERMITTED TO PARTICIPATE AS A KASHABBA TRIBE MINISTRIES TEAM MEMBER ON THE ABOVE MINISTRY TRIP: *(Please initial each paragraph)*

I ACCEPT AND ASSUME ALL RISKS AND HAZARDS FROM THIS ACTIVITY, BOTH KNOWN AND UNKNOWN, INCLUDING BUT NOT LIMITED TO THE RISKS AND HAZARDS IDENTIFIED ABOVE.

Initial: _____

I HEREBY VOLUNTARILY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS AND INDEMNIFY KASHABBA TRIBE MINISTRIES, ITS DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, COORDINATORS, FACILITATORS, VOLUNTEERS, AND OTHER TEAM MEMBERS FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, ACTIONS OR RIGHTS OF ACTIONS, WHICH ARE RELATED TO, ARISE OUT OF, OR ARE IN ANY WAY CONNECTED WITH MY PARTICIPATION IN THIS ACTIVITY, WHICH I NOW HAVE OR MAY HAVE IN THE FUTURE, SPECIFICALLY INCLUDING BUT NOT LIMITED TO THE NEGLIGENT ACTS OR OMISSIONS OF ANY PERSON SO RELEASED, HELD HARMLESS AND INDEMNIFIED, AND SPECIFICALLY INCLUDING CLAIMS RELATING TO ANY PERSONAL INJURY THAT I MAY SUFFER.

Initial: _____

I AGREE NOT TO MAKE A CLAIM, FILE SUIT OR DEMAND ANYTHING FOR ANY INJURY, DEATH OR LOSS THAT ARISES FROM MY PARTICIPATION IN THIS ACTIVITY.

Initial: _____

I AGREE TO PAY THE COSTS AND/OR LEGAL EXPENSES INCURRED BY THE TRIP LEADER(S), ORGANIZERS AND/OR PARTICIPANTS AS A RESULT OF ANY CLAIM OR SUIT FILED BY ME, OR FILED BY ANYONE ELSE AS A RESULT OF MY CONDUCT.

Initial: _____

I CONSENT AND AGREE TO PAY FOR ANY MEDICAL TREATMENT RENDERED TO ME BY ANYONE FOR ANY INJURY OR OTHER MEDICAL SITUATION DURING, OR RESULTING FROM, MY PARTICIPATION.

Initial: _____

I AUTHORIZE KASHABBA TRIBE MINISTRIES TO ARRANGE FOR TRANSPORTATION, FOOD, AND LODGING FOR ME ON THIS TRIP.

Initial: _____

I AGREE THAT THESE PROMISES, AGREEMENTS, ASSUMPTIONS OF RISK AND RELEASES BIND ME, MY FAMILY, ALL MINORS WITH ME OR ON WHOSE BEHALF I SIGN, AND MY HEIRS OR LEGAL REPRESENTATIVES AND ASSIGNS.

Initial: _____

I HEREBY MAKE EACH OF THE ABOVE STATEMENTS, ACKNOWLEDGEMENTS, AUTHORIZATIONS, RELEASES, DISCHARGES, HOLD HARMLESS AGREEMENTS, INDEMNITIES AND OTHER AGREEMENTS ON BEHALF OF MY MINOR CHILD OR CHILDREN, ACCOMPANYING ME OR PARTICIPATING ALONE ON THIS TRIP WHOSE NAME(S) APPEAR(S) BELOW, AND AGREEE THAT THEY SHALL BE BINDING ON EACH MINOR CHILD, HIS HEIRS, SUCCESSORS AND ASSIGNS:

NAME OF MINOR _____

SIGNATURE OF MINOR _____

I HAVE READ CAREFULLY AND UNDERSTAND THIS LIABILITY RELEASE. I AM AWARE THAT I AM GIVING UP IMPORTANT LEGAL RIGHTS AND SIGN OF MY OWN FREE WILL.

SIGNATURE _____ DATE ____/____/____

PRINT NAME _____

FULL ADDRESS _____

DISCIPLINE POLICY

"If your brother sins, go and show him his fault in private; if he listens to you, you have won your brother. But if he does not listen to you, take one or two more with you, so that BY THE MOUTH OF TWO OR THREE WITNESSES EVERY FACT MAY BE CONFIRMED. If he refuses to listen to them, tell it to the church; and if he refuses to listen even to the church, let him be to you as a Gentile and a tax collector." –Matthew 18:15-17

It is the intent of Kashabba Tribe Ministries to follow the biblical patterns of discipline within the confines of all international ministry trips. Kashabba Tribe Ministries ministry trips are attempting to open up countries to renewal and revival, often attracting spiritual warfare. *1 John 2:1- "My little children, I am writing these things to you so that you may not sin And if anyone sins, we have an Advocate with the Father, Jesus Christ the righteous."* The goal of Kashabba Tribe Ministries is to create a safe, healthy environment, in order to minister to the people of the country visited.

We recognize that Ministry Team Members must be in correct relationship with God and with others, in order to ensure completion of mission objectives. The consequences of one's sin or disobedience have the potential to bring confusion and destruction to any ministry trip. We desire to come along side each Ministry Team Member in loving correction only when necessary. All compliance with any disciplinary action by Kashabba Tribe Ministries is greatly appreciated.

Below are procedures that will be followed by Kashabba Tribe Ministries leadership, if any disciplinary action is necessary. To avoid any misunderstanding, please read the outlined procedures below, sign the consent form, and return it to Kashabba Tribe Ministries. By consenting to the following, you agree to receive correction, public rebuke and/or removal, if decided necessary by Kashabba Tribe Ministries leadership. If issues of sin or disobedience come to light, rest assured, the steps below will be followed to bring resolution to the situation.

1. If you have a problem with any individual, you are to lovingly approach that person first, without going to any other Ministry Team Member. Attempt to bring understanding and resolution to the conflict. If it is with someone of the opposite sex, please talk with him or her in a place where others are present, but can not hear your conversation. Many times what you may consider a problem is simply a misunderstanding and bringing it to their attention often brings resolution.
2. If you find no resolution after you have conversed with the individual, the individuals involved are required to discuss the problem with a Ministry Team Leader. The Ministry Team Leader should be able to determine what the problem is, who is at fault, and bring closure to the situation.
3. If the Ministry Team Leader discovers that there has been no closure to the situation, there will be another meeting with the parties involved, the Ministry Team Leader, and the Event Coordinator in order bring closure to the difficult situation.

<<<<<< OVER >>>>>>

4. If the Ministry Team Leader and Event Coordinator find any individual to be in *rebellion to correction*, a senior Kashabba Tribe Ministries representative will be informed. A senior KTM representative will bring definite closure to the situation, in which all parties will be present to hear the final conclusion of the matter. Possible conclusions may include an individual returning home within 24 hours or being brought before the whole Ministry Team for public correction. If absolutely necessary, the Ministry Team will be informed not to have any personal contact with the individual throughout the remainder of the trip. The individual will not be permitted to eat, sleep, or travel with any Ministry Team Member.

5. If any individual is involved in any sin that can not, at the discretion of leadership, be taken care of in a timely manner or would affect the team in an adverse way, leadership reserves the right to put procedure (4) into action immediately.

I AGREE TO FOLLOW THE DISCIPLINE PROCEDURES LISTED ABOVE IF DIRECTLY INVOLVED IN CONFLICT. AS A MINISTRY TEAM MEMBER I AGREE TO FOLLOW THE DIRECTIONS AND DECISIONS MADE BY KASHABBA TRIBE MINISTRIES LEADERSHIP REGARDING OTHER MINISTRY TEAM MEMBERS.

SIGNED: X _____ DATE ____/____/____

MEDIA RELEASE

Kashabba Tribe Ministries often takes photographs and video footage on ministry trips using them in Kashabba Tribe Ministries advertising, promotional materials, web page, and publications. In signing below, you fully authorize Kashabba Tribe Ministries to use video or photographs taken of you in any or all of the above mentioned materials.

I AUTHORIZE KASHABBA TRIBE MINISTRIES TO USE ANY PHOTOGRAPHS OR VIDEO FOOTAGE TAKEN OF MYSELF IN ANY AND ALL PUBLICATIONS MENTIONED ABOVE.

SIGNED: X _____ DATE ____/____/____

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PASTORAL REFERENCE EVALUATION

I, _____, WISH TO BE CONSIDERED AS A KASHABBA TRIBE MINISTRIES TEAM

MEMBER FOR: _____
 DESTINATION (CITY, COUNTRY) DATES

I GIVE MY FULL CONSENT THAT _____ COMPLETE THIS
 NAME OF REFERENCE

PASTORAL REFERENCE EVALUATION AND RELEASE IT TO KASHABBA TRIBE MINISTRIES.

SIGNED: X _____ DATE ____/____/____

Dear Pastor/Church Leader,

The applicant above has applied to be on a Kashabba Tribe Ministries Ministry Team. We take seriously our responsibility toward those to whom we minister, both here and abroad. Therefore, Kashabba Tribe Ministries greatly appreciates your supplying the information requested on this form. Please return this form DIRECTLY TO OUR OFFICE upon completion. Thank You!

How long have you been acquainted with the applicant? _____

In which area(s) of church life has the applicant served, and in which area(s) is he/she currently serving?

Evaluation of Applicant's Emotional & Spiritual Maturity: The applicant must be able to accommodate himself/herself readily to unaccustomed living conditions and new social situations. Adjustment may have to be made as to diet, social customs, climate changes, etc. Keeping in mind the challenge of these unusual demands, please rate this applicant by checking a block under each of the following categories:

- PHYSICAL CONDITION**
- Frequently incapacitated
 - Somewhat below par
 - Fairly healthy
 - Good health

- EMOTIONAL RESILIENCE**
(In trying situations)
- Gets angry; impulsive
 - Withdrawn
 - Gets discouraged easily
 - Meets constructively
 - Unusual ability to lead

- ACHIEVEMENT**
(Ability to formulate, execute & carry plans to conclusion)
- Starts but doesn't finish
 - Does only what is assigned
 - Meets average expectations
 - Superior creative ability

- SOCIAL INTERACTION**
- Avoided by others
 - Tolerated by others
 - Liked by others
 - Well-liked by others

- WILLINGNESS TO SERVE**
- Reluctant to serve
 - Motives confused
 - Usually willing to serve
 - Eager to serve as needed

- LEADERSHIP**
(Ability to inspire others & maintain their confidence)
- Makes an effort to lead
 - Tries but lacks ability
 - Has some leadership promise

- TEAMWORK**
- Frequently causes friction
 - Insists on having own way
 - Usually cooperative
 - Works well with others
 - Energized by teamwork

- INTELLIGENCE**
- Learns and thinks slowly
 - Average mental ability
 - Alert; has a good mind
 - Brilliant, exceptional

- CHRISTIAN EXPERIENCE**
- Relatively superficial
 - Over-emotional
 - Genuine but mild
 - Rich and growing
 - Warmly contagious

- RESPONSIVENESS**
(To the feelings and needs Of others)
- Slow to sense how others feel
 - Reasonably responsive
 - Understanding & Thoughtful
 - Extremely responsive

- PRAYER MINISTRY**
(Praying for inner and physical healing)
- Has had much experience and expertise
 - Has some training and experience
 - Has not been trained and is very new at this

Evaluation of applicant's skills, training, profession, or trade. (Answer only if you have first hand info)

- ___ Incompetent
- ___ Doubtful
- ___ Adequate
- ___ Superior in competence

In what other skills or areas is he/she well qualified?

Listed below are some of the tendencies which, if present, may reduce the effectiveness of the applicant.

Please Circle any words or descriptions which pertain to applicant:

- | | | | |
|----------------------|---------------------|-------------------|----------------------------|
| Impatient | Argumentative | Domineering | Cocky |
| Easily offended | Critical of others | Anxious | Easily embarrassed |
| Easily discouraged | Frequently worried | Nervous or tense | Given to moods |
| Intolerant | Lacking in humor | Can't take a joke | Unable to cope with stress |
| Erratic in attitudes | Racially Prejudiced | Self-absorbed | |

If the applicant seems relatively free from all such tendencies, check here _____

Please comment briefly on the family and social background of the applicant. _____

Is the applicant financially responsible? Yes No

Please describe any physical limitations the applicant may have. _____

Is the applicant able to preach/teach the gospel effectively from the "pulpit?" Yes No

What size church are they able to speak in front of? <50 <100 <500 500+

Please use a separate sheet of paper to elaborate if the answer is "yes" to any of the following questions:

- a) Has the applicant proven on any occasion to be unreliable, dishonest, or of questionable character?
- b) As far as you know, has the applicant ever been arrested for any offense other than minor traffic violations?
- c) To your knowledge, has the applicant ever been involved in drug abuse, homosexuality, or the occult?
- d) Has the applicant had psychiatric treatment?
- e) Are you aware of any unresolved problems in their life? (Ex: unrepentance, anger, unforgiveness, impurity)

If the answers to a), b), c) d), and e) above are all "no", please check here _____

What is your overall evaluation of the applicant's promise as a Kashabba Tribe Ministries Team participant?

- | | |
|---|---|
| ___ He/she is definitely unsuited | ___ He/she is an average prospect |
| ___ At this time I feel he/she is not suited | ___ He/she is an above average prospect |
| ___ He/she is a good prospect, but I do have reservations | ___ He/she is an unusually exceptional prospect |

Check any of the following that you feel are motivating the applicant to become involved with a Kashabba Tribe Ministries Ministry Team:

- | | | |
|-----------------------|--------------------------------------|------------------|
| ___ Christian Service | ___ Desire to spread the gospel | ___ Other: _____ |
| ___ Travel | ___ Desire to help others | |
| ___ Adventure | ___ Receive help, ministry | _____ |
| ___ Discipleship | ___ Escape unpleasant home situation | |

REFERENCE NAME _____

ADDRESS _____

PHONE (_____) _____

SIGNATURE: X _____

PLEASE MAIL DIRECTLY TO:
KASHABBA TRIBE MINISTRIES
P.O. BOX 873642
WASILLA, AK 99687
PHONE: (410) 504-6409
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Kashabba Tribe Ministries



EVERY tribe
EVERY tongue

P.O. Box 873642, Wasilla, AK 99687 (410) 504-6409 www.kashabbatribe.com

CONFIDENTIAL REFERENCE EVALUATION

I, _____, WISH TO BE CONSIDERED AS A KASHABBA TRIBE MINISTRIES TEAM

MEMBER FOR: _____
DESTINATION (CITY, COUNTRY) _____ DATES _____

I GIVE MY FULL CONSENT THAT _____ COMPLETE THIS
NAME OF REFERENCE

CONFIDENTIAL REFERENCE EVALUATION AND RELEASE IT TO KASHABBA TRIBE MINISTRIES.

SIGNED: X _____ DATE ____/____/____

Dear Friend of the Applicant,

The applicant above has applied to be on a Kashabba Tribe Ministries Ministry Team. We take seriously our responsibility toward those to whom we minister, both here and abroad. Therefore, Kashabba Tribe Ministries greatly appreciates your supplying the information requested on this form. Please return this form DIRECTLY TO OUR OFFICE upon completion. Thank You!

- How long have you been acquainted with the applicant? _____
- What is your relationship to the applicant? _____
- In which area(s) of church life has the applicant served, and in which area(s) is he/she currently serving?

4. **Evaluation of Applicant's Emotional & Spiritual Maturity:** The applicant must be able to accommodate himself/herself readily to unaccustomed living conditions and new social situations. Adjustment may have to be made as to diet, social customs, climate changes, etc. Keeping in mind the challenge of these unusual demands, please rate this applicant by checking a block under each of the following categories:

PHYSICAL CONDITION

- Frequently incapacitated
- Somewhat below par
- Fairly healthy
- Good health

EMOTIONAL RESILIENCE

(In trying situations)

- Gets angry; impulsive
- Withdrawn
- Gets discouraged easily
- Meets constructively
- Unusual ability to lead

ACHIEVEMENT

(Ability to formulate, execute & carry plans to conclusion)

- Starts but doesn't finish
- Does only what is assigned
- Meets average expectations

- Superior creative ability

SOCIAL INTERACTION

- Avoided by others
- Tolerated by others
- Liked by others
- Well-liked by others

WILLINGNESS TO SERVE

- Reluctant to serve
- Motives confused
- Usually willing to serve
- Eager to serve as needed

LEADERSHIP

(Ability to inspire others & maintain their confidence)

- Makes an effort to lead
- Tries but lacks ability

- Has some leadership promise

TEAMWORK

- Frequently causes friction
- Insists on having own way
- Usually cooperative
- Works well with others
- Energized by teamwork

INTELLIGENCE

- Learns and thinks slowly
- Average mental ability
- Alert; has a good mind
- Brilliant, exceptional

CHRISTIAN EXPERIENCE

- Relatively superficial
- Over-emotional
- Genuine but mild
- Rich and growing

- Warmly contagious

RESPONSIVENESS

(To the feelings and needs of others)

- Slow to sense how others feel
- Reasonably responsive
- Understanding thoughtful
- Extremely responsive

PRAYER MINISTRY

(Praying for inner and physical healing)

- Has had much experience and expertise
- Has some training and experience
- Has not been trained and is very new at this

Evaluation of applicant's skills, training, profession, or trade. (Answer only if you have first hand info)
 ___ Incompetent
 ___ Doubtful
 ___ Adequate
 ___ Superior in competence

In what other skills or areas is he/she well qualified?

Listed below are some of the tendencies which, if present, may reduce the effectiveness of the applicant.

Please Circle any words or descriptions which pertain to applicant:

- | | | | |
|----------------------|---------------------|-------------------|----------------------------|
| Impatient | Argumentative | Domineering | Cocky |
| Easily offended | Critical of others | Anxious | Easily embarrassed |
| Easily discouraged | Frequently worried | Nervous or tense | Given to moods |
| Intolerant | Lacking in humor | Can't take a joke | Unable to cope with stress |
| Erratic in attitudes | Racially Prejudiced | Self-absorbed | |

If the applicant seems relatively free from all such tendencies, check here _____

Please comment briefly on the family and social background of the applicant. _____

Is the applicant financially responsible? Yes No

Please describe any physical limitations the applicant may have. _____

Is the applicant able to preach/teach the gospel effectively from the "pulpit?" Yes No
 What size church are they able to speak in front of? <50 <100 <500 500+

Please use a separate sheet of paper to elaborate if the answer is "yes" to any of the following questions:

- f) Has the applicant proven on any occasion to be unreliable, dishonest, or of questionable character?
- g) As far as you know, has the applicant ever been arrested for any offense other than minor traffic violations?
- h) To your knowledge, has the applicant ever been involved in drug abuse, homosexuality, or the occult?
- i) Has the applicant had psychiatric treatment?
- j) Are you aware of any unresolved problems in their life? (Ex: Unrepentance, anger, unforgiveness, impurity)

If the answers to a), b), c) d), and e) above are all "no", please check here _____

What is your overall evaluation of the applicant's promise as a Kashabba Tribe Ministries Team participant?

- | | |
|---|---|
| ___ He/she is definitely unsuited | ___ He/she is an average prospect |
| ___ At this time I feel he/she is not suited | ___ He/she is an above average prospect |
| ___ He/she is a good prospect, but I do have reservations | ___ He/she is an unusually exceptional prospect |

Check any of the following that you feel are motivating the applicant to become involved with a Kashabba Tribe Ministries Ministry Team:

- | | | |
|-----------------------|--------------------------------------|------------------|
| ___ Christian Service | ___ Desire to spread the gospel | ___ Other: _____ |
| ___ Travel | ___ Desire to help others | |
| ___ Adventure | ___ Receive help, ministry | _____ |
| ___ Discipleship | ___ Escape unpleasant home situation | |

REFERENCE NAME _____

ADDRESS _____

PHONE (_____) _____

SIGNATURE: X _____

PLEASE MAIL DIRECTLY TO:
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