

# FALL 2009 GTCA MIGRATION APPLICATION

The purpose of this form is to facilitate fellowship between sending and receiving localities for saints who are burdened to migrate to one of the GTCA cities for fall 2009: Charlottesville, Fort Collins, Madison, Montreal, and Philadelphia.

Applying for:	<input type="checkbox"/> Full-time Field Team <input type="checkbox"/> Migrating Saint		
Burdened to join Full-time Team in:	<input type="checkbox"/> Charlottesville, VA	<input type="checkbox"/> Montreal, Quebec	Initial Commitment:
	<input type="checkbox"/> Fort Collins, CO	<input type="checkbox"/> Philadelphia, PA	
	<input type="checkbox"/> Madison, WI		
			<input type="checkbox"/> One Semester <input type="checkbox"/> Indefinite <input type="checkbox"/> One Year

**Biographical Information:**

First Name:		Last Name:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth:		Marital Status:	<input type="checkbox"/> Single <input type="checkbox"/> Married	Number of Children: <input style="width: 20px;" type="text"/>
Locality:		Dates in Locality: <input style="width: 100px;" type="text"/>		
Cell Phone:		Email: <input style="width: 100px;" type="text"/>		
Dates in FTTA: (by term)	to	Languages Spoken: <input style="width: 100px;" type="text"/>		
Present Occupation:	<input type="checkbox"/> Serving Full-time <input type="checkbox"/> Working Full-time <input type="checkbox"/> Retired		Available Arrival Date*:	Projected Departure Date*:
	*See respective target city websites for recommended arrival and departure dates.			

**Church Life and Serving Experience:**

Number of years in the church life:		Number of years serving full-time on a campus team:	
Raised in the church life:	<input type="checkbox"/> yes <input type="checkbox"/> no	Experience hosting a campus based meeting in your home:	<input type="checkbox"/> yes <input type="checkbox"/> no
Terms completed in FTTA:		<i>For Community Saints:</i> Number of years hosting a campus-related home meeting or participating in campus meetings: <input style="width: 50px;" type="text"/>	
Localities you lived in for 6 months or more:	<input style="width: 100%; height: 20px;" type="text"/>		
Locality:		Start:	End:
Status:	<input type="checkbox"/> Serving Full-time <input type="checkbox"/> Working Full-time / Other	Areas of Church Service:	<input style="width: 100%; height: 20px;" type="text"/>
Locality:		Start:	End:
Status:	<input type="checkbox"/> Serving Full-time <input type="checkbox"/> Working Full-time / Other	Areas of Church Service:	<input style="width: 100%; height: 20px;" type="text"/>

**Essay:** Please describe your serving experience (full-time and/or church life) and particular interest in participating in a Field Team; please include relevant experiences that have prepared you to participate on a pioneering Field Team.

**Skills:**

Technical:	<input type="checkbox"/> Database (Platform: <input style="width: 50px;" type="text"/> ) <input type="checkbox"/> Programming (Languages: <input style="width: 50px;" type="text"/> ) <input type="checkbox"/> Web Design (Platform: <input style="width: 50px;" type="text"/> )		
Mechanical:	<input type="checkbox"/> Facility Maintenance <input type="checkbox"/> Automobile Maintenance <input type="checkbox"/> Other <input style="width: 50px;" type="text"/>		
Creative:	<input type="checkbox"/> Graphic Design <input type="checkbox"/> Proofreading / Editing <input type="checkbox"/> Piano <input type="checkbox"/> Guitar <input type="checkbox"/> Other <input style="width: 50px;" type="text"/>		

**Signature:**

	Date:	
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**APPLICANT:** Please submit completed and signed form to an elder, player-coach, or responsible brother for them to complete the recommendation form and to submit the application to the Co-workers.

# FALL 2009 GTCA MIGRATION RECOMMENDATION FORM

**TO:** Elders, Player-coaches, and Responsible Brothers

**PURPOSE:** To assess an applicant's suitability for participation for migration to a GTCA city. Please submit this form directly to the respective brothers from each target city as listed on their GTCA website or at [www.GTCA.us](http://www.GTCA.us).

Name:					
Relationship to Applicant:	<input type="checkbox"/> Elder <input type="checkbox"/> Responsible Brother <input type="checkbox"/> Player-coach		Known Applicant for:		
Please briefly assess the applicant's:					
Ability to Coordinate:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Knowledge of the Truth	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Participation in the Church Life:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Flexibility:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Please use the space below to elaborate on any of the points above (feel free to use the back as necessary):					
Please notify us of any special considerations or relevant special circumstances:					
<b>Signature:</b>				Date:	

Name:					
Relationship to Applicant:	<input type="checkbox"/> Elder <input type="checkbox"/> Responsible Brother <input type="checkbox"/> Player-coach		Known Applicant for:		
Please briefly assess the applicant's:					
Ability to Coordinate:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Knowledge of the Truth	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Participation in the Church Life:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Flexibility:	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
	Poor	Average		Excellent	
Please use the space below to elaborate on any of the points above (feel free to use the back as necessary):					
Please notify us of any special considerations or relevant special circumstances:					
<b>Signature:</b>				Date:	