

People of Peru Application/Information Sheet

Group/leader _____

Name *exactly* as it appears on your passport _____

Passport Number (please write clearly) _____

Address _____ City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____ Cell _____

Email _____ Gender: M F Date of Birth _____

GETTING TO KNOW YOU

Do you speak any languages other than English? No Yes _____

Previous service/mission trip experience? No Yes

Where? _____

What was your specific work that project? _____

What special skills do you have? _____

Student-What level? _____

Professional-What area? _____

Retired-From what? _____

Other _____

What area of service are you interested in? _____

Do you have any specific dietary needs? No Yes _____

Do you have any non-typical physical limitations? No Yes _____

(People of Peru Project is happy to make accommodations for individuals with special needs we just need to know ahead of time what they are)

Please name two adult non relatives that we can contact for recommendation purposes.

1. _____ Phone# _____
2. _____ Phone# _____

I certify that everything in this application is correct. I (we) wish to participate on this short-term service project and will uphold all guidelines and requirements set forth by the sponsoring organization. I (we) also agree to the payment guidelines as stated herein.

Your Signature _____

Date _____