



# Medical Elective Application Form

*Please note: A separate form is required per person*

Full Name : ..... Male / Female  
 Date of Birth : ..... Nationality: .....  
 Place of Birth : .....  
 Marital Status : Married / Engaged / Single / Widowed (delete as applicable)  
 University Address : .....  
 ..... Postcode: .....  
 Telephone Number : ..... Mobile: .....  
 Email Address : .....  
 Home Address : (If different from above) .....  
 ..... Postcode: .....  
 Telephone Number : .....  
 Email Address : .....

1. How did you hear about UFM? .....
2. Do you agree with our Doctrinal Statement? .....

3. Please give details of your educational qualifications and courses prior to medical school

Month/Year	School/College/University (incl. location)	Qualification	Grade/Level

4. Medical Course Details: Where are you studying? .....  
 Start Date: .....When do you expect to graduate? .....  
 In which areas do you hope to specialise? .....  
 .....  
 Dates of your elective (as exactly as you know at this stage): .....

5. Please give a brief account of your conversion: .....  
 .....  
 .....  
 .....

6. Name of Church or Fellowship of which you are a member: .....

.....

7. What has been your involvement in the life and witness of your local Church/Fellowship? .....

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.....

Is your Church aware of this enquiry? .....

8. Explain your interest in missionary work and your reasons for making this enquiry: .....

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9. In which country do you hope to carry out your elective? .....

10. Are you thinking of using your medical qualifications in full time missionary work in the future? .....

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11. Details of any Missionary/Bible College or other theological training: .....

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12. Medical Information: Are you physically fit? .....

Do you require ongoing medical care? .....

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Do you have any tendency to depression or difficulty in coping under stress?.....

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13. Name and address of your Pastor: .....

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Email: ..... Tel:.....

**Please note:**

- We will be requesting a reference from your pastor or church leader named above.
- If this application proceeds, a Criminal Record Bureau disclosure may be required.
- In order for us to process your application fully, an administrative charge of £50 will be made. It will not be returnable unless, for any reason on the part of UFM Worldwide, we find we cannot proceed with your placement. Please make cheques payable to 'UFM Worldwide' and enclose with your application form. Thank you.

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**Signature :**

**Date :**

**Please return completed form to Rachel Lambert, Personnel Coordinator**