

We would appreciate you filling out this form to assist us in assessing the above named applicant suitability. This is a short term missionary service in which there will be some physical exertion over a period of 24 weeks of training and study in a group situation with possible overseas travel. This form will be kept confidential. Serious consideration will be given to your comments; therefore we ask that you complete this form carefully. Thank you for your assistance. Please indicate the following, and comment where necessary:

Name of Applicant: _____

1. Weight kg (st lbs) Height cm (ft ins)

2. Is the applicant under medical supervision at this time or taking any medication?

If so, what kind? _____

3. Would you consider the applicant in good physical health? Yes No

4. Is the applicant's chest, heart and blood pressure normal? Yes No

5. Is the applicant's sight, hearing and speech normal? Yes No

6. Has the applicant adequate emotional and mental stability to undertake such service and training?

Yes No

7. Please list any significant medical and/or psychiatric history:

8. Please add any additional comments regarding the applicant's health or special limitations affecting physical, mental or emotional capabilities

Doctors Sign: _____ Date: 10-Feb-15

Doctors Name

Street

Country, Zip Code, City

Please mail this confidential form to:

Youth With A Mission
Discipleship Training School
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Rarotonga, Cook Islands

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