



MISSION TRIP QUESTIONNAIRE

*Please return to: esteban.cardona@scalpelatthecross.org
or by mail to: P.O. Box 558436, Miami, FL 33255

Date: _____

Name: _____

Home Address: _____

Home Phone: _____ Mobile Phone: _____

E-mail Address: _____

Date of Birth: _____ Marital Status: Single Married

Do you have children? _____ Age(s): _____

How did you learn about *Scalpel At The Cross*? _____

Have you visited our website, www.scalpelatthecross.org? Yes No

Would your mission trip be self-funded or sponsored? _____

What is your occupation? _____

Work history: _____

Do you have knowledge of orthopaedics? Yes No

Do you have knowledge of surgical equipment? Yes No

Are you comfortable in a surgical setting? Yes No

What talents do you feel you could bring to the team?

- | | |
|---|---|
| <input type="checkbox"/> Artistic/Musical | <input type="checkbox"/> Manual Transmission Driver |
| <input type="checkbox"/> Compassionate/Encourager | <input type="checkbox"/> Leadership Skills |
| <input type="checkbox"/> Computer & Tech/Data Entry | <input type="checkbox"/> Organizer/Coordinator |
| <input type="checkbox"/> Construction/Maintenance | <input type="checkbox"/> Prayer Support/Witness |

Other talents: _____

What is your Spanish proficiency? _____
(0=none; 10= perfectly fluent in reading, writing, and speaking)

Could you be an interpreter? Yes No

Have you been on a mission trip in the past? Yes No

Where? _____ **For how long?** _____

Any particular organization and, if so, which one? _____

Tell us about your experience: _____

Do you have any special dietary needs? Yes No

Do you have any special health considerations for your travel? Yes No

If so, explain: _____

