

APPLICATION FORM
TRANSLATORS



First Name : Last Name :
Birth date (dd/mm/yy) : I.D. Number :
Sex : Male Female Age :
Marital Status : Single Engaged Married Other
Address :
Telephone (Home/Work/Mobile) :
E-mail :

Pastor's Name : Telephone :
Second Reference: Telephone :
Church Name : Denomination :
Church Address :
Telephone : E-mail :

Have you ever translated before? Yes No
When and what kind of event :
Knowledge of English : Fluent Advanced Intermediate
Fluent - Native speaker. Advanced - Able to understand different accents. Intermediate - Able to understand clearly spoken English.
Other languages spoken :

When did you become a Christian?
How are you involved in your church?
Please explain how you personally encountered Jesus Christ as your Lord and Saviour:

Have you been involved with any of the ships? Logos Doulos Logos II Logos Hope No

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State the dates and times you are available to translate. (i.e. Tue 15th 9am - noon, Thu 17th 1 - 8 pm)

I commit to translate during the above stated times.

Interviewed by :

Place/ Date :

Name/ Signature :

OM International holds names and addresses on computer for the purpose of keeping its supporters up to date with its work. If you would prefer NOT to receive information from OM, please tick this box: Your details will not be passed to other organisations.