

INTERNATIONAL NEEDS CANADA

DISCOVERY
TOUR

Join us on a
Medical Discovery Tour



international needs
transformed lives, changed communities

210 – 4031 Fairview Street Burlington, Ontario L7L 2A4
Office: 905-637-9411 · Toll free: 1-888-702-9805 · www.internationalneeds.ca

Dear Applicant,

Thank you for your willingness to support International Needs Canada, by participating in one of our Discovery Tours. You are partnering with us and embarking on a journey that will impact the lives of many people in remote communities and struggling cities. We appreciate all the time and energy you will be investing in preparation for this trip. We value your time and commitment. May you be richly blessed.

Included is all the necessary documentation to help you get started. As you complete all the steps please check them off on the list below to help you keep track of your progress.

Discovery Tour Checklist:

- Application Completed and Submitted to International Needs Canada.
- \$500 Deposit Submitted with Application (non refundable).
- Balance of trip payment due 45 days before departure.
- Read and signed Agreement and Release Liability Form.
- Valid Passport (expiring six months beyond date of return).
- Colour copy of first two pages (photo & ID).
- Police Check: Please go online through the www.backcheck.ca/inc website.
- Emergency Medical Form.
- Signed Child Protection Policy – Code of Conduct Form.
- Signed Sponsor Visit Application Form, if applicable.
- Application for Tourist Visa (if needed).
- Out of Country Medical Insurance Coverage (**mandatory**, over and above provincial coverage).
- Cancellation/interruption insurance (recommended).
- Appointment with your local International Travel Clinic.
- All necessary vaccinations and prescriptions filled.

If you have any questions please contact your team leader.

Thank you for choosing to invest in change.



Corrie Mulder
Director of Operations
International Needs Canada
Email: corrie@internationalneeds.ca

International Needs Canada

Discovery Tour Application Form

1. General Information: (Please Print)

Last Name: _____ First Name: _____ M F

Marital Status: _____ Name of Spouse: _____

Occupation: _____ Present Previous

Status: Employed Unemployed Semi-retired Retired Student Other: _____

Education: _____ Area of Study: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

Email Address: _____

2. Passport Information:

Please note that all applicants' passports must be valid for six months beyond date of return.

Full Name (as printed in Passport): _____
(Surname) (Given Names)

Passport Number: _____ Nationality: _____

Date of Birth: (DD/MM/YY) _____ Place of Birth: _____

Date of Issue: (DD/MM/YY) _____ Date of Expiry: (DD/MM/YY) _____

Place of Issue: (Prov/City, Country) _____

3. Qualifications/Certifications:

Please check all valid qualifications and certifications you currently hold:

CPR First Aid Life Guard Sports Teacher

Trades: _____

Tech: _____

Other: _____

If you volunteer in your community, in what capacity? _____

Trip Specifics:

Have you participated on a trip with International Needs Canada prior to this? Yes No

Have you participated on a cross-cultural trip prior to this? Yes No

If so, where did you go, what was your role on the team and what did you learn from your host country?

Please list two reasons why you wish to participate on this tour. What do you hope to learn from this experience?

What gifts/skills/abilities or experiences do you have that you can contribute to this tour?

Do you speak, read or write a foreign language? (please indicate your proficiency level)

4. References:

Please list two individuals that you have asked to be references for you below. International Needs may contact these references. References may not be family members.

1. Last Name: _____ First Name: _____ M F

Relationship: _____

Phone: (_____) _____ - _____ Email: _____

2. Last Name: _____ First Name: _____ M F

Relationship: _____

Phone: (_____) _____ - _____ Email: _____

MY TEAM COMMITMENT

I will make every effort to:

- Submit my own personal preferences (privacy, food, dress, etc.) to the standards of the project hosts.
 - Willingly submit to my team leader(s) in all things throughout the project.
 - Build up my fellow project participants.
 - Participate fully and willingly in all pre-trip and post-trip preparation and debriefing meetings as required.
3. I acknowledge that all funds raised above and beyond my specific fee will be re-allocated to the country project. I acknowledge that all funds required to participate on this trip must be submitted to International Needs Canada **45 days prior** to the departure date. Failure to do so will result in my voluntary withdrawal from the team, I will pay any financial penalty attached to cancelling airline and accommodation reservations, and I will arrange to have any contributions made on my behalf returned to my donors upon request.
4. I understand that International Needs is a Christian not-for-profit organization and is founded on Christian principles. I will abide by their vision and mission statements.
5. I have read and signed the Agreement and Release Liability Form.

Applicants' Name: _____ Date: _____

Signature: _____

PLEASE PRINT CLEARLY

Personal Information

Last Name: _____ First Name: _____ M F
Home Address: _____ City: _____
Province: _____ Postal Code: _____ Home Phone: (_____) _____ - _____
Family Physicians Name: _____ Phone Number: (_____) _____ - _____

Emergency Contact Information

Last Name: _____ First Name: _____ M F
Relationship: _____
Home Address: _____
City: _____ Province: _____ Postal Code: _____
Home Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____
Mobile Phone: (_____) _____ - _____ Email: _____

Medical Insurance Information

Provincial Health Card Number: _____
Medical Insurance Company Name (for out of country coverage): _____
Policy Number: _____ Telephone (calling from overseas): _____

Health Information

Do you have any health concerns or physical challenges that would limit your level of participation on this team?

Please list any prescription medication you are currently taking:

Please list any pre-existing medical conditions:

Any food or medication allergies: _____

AGREEMENT AND RELEASE LIABILITY FORM

1. I, _____ [name of releaser], acknowledge that I have voluntarily applied to International Needs Canada to participate in a trip to _____ [country name] organized by International Needs Canada for the purposes outlined in the attached information package.
2. I am aware that participating in the trip may involve me being exposed to certain hazards and dangers, including, but not necessarily limited to hazards and dangers inherent in travel in lesser-developed parts of the world. In particular, I understand that I may be exposed to danger from crime and/or increased threat of disease.
3. I acknowledge that I have considered and understood these risks and am voluntarily participating in the trip with knowledge of the potential danger involved. I hereby agree to accept any and all risk of injury, death, or loss or destruction of property resulting in any way from the trip.
4. I further acknowledge that in arranging accommodations for the trip, including but not limited to air and surface transportation, hotels, restaurants and the like, International Needs Canada and any travel agency engaged by International Needs Canada are acting as the agent of the undersigned for such purpose and shall not be responsible for nor have any liability as a result of any loss, injury or damage that may be caused as a result of such public accommodation.
5. As consideration for being permitted by International Needs Canada and any of its affiliated organizations to participate in the trip, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make any claim against, sue, or attach the property of International Needs Canada or any of its affiliated organizations or any of their respective officers, agents, directors, employees or representatives (the "Releasees") for any loss, injury or damage of any kind resulting from any participation in the trip that is or is alleged to be the result of the negligence or other acts or omissions, however caused, of the Releasees, or any of them. I hereby release all of the Releasees from all actions, claims or demands that I, my assignees, heirs, distributees, guardians, and resulting from my participation in the trip.
6. I have carefully read this Agreement and fully understand its contents. I am aware that this is a release of liability and a binding agreement between me and International Needs Canada and I sign it of my own free will.

Executed at _____, on this _____ day of _____, 20_____.

Name [please print]: _____

Signature: _____

DECLARATION OF WITNESS

I certify that _____ [name of Releaser] acknowledged in my presence that _____ [he/she] had read and fully understood the meaning and consequences of the foregoing release, and signed it in my presence. Executed at _____, on this _____ day of _____, 20_____.

Signature of Witness (**not a relative**): _____

[Print name and Address of Witness]: _____

INTERNATIONAL NEEDS CANADA **CHILD PROTECTION POLICY**

INTRODUCTION

International Needs Canada (INCA) supports the rights of children and is committed to their safety and well-being. It is opposed to all forms of child abuse and exploitation and will continuously strengthen its child protection processes to mitigate the risk of abuse within its programs and activities. INCA is committed to being a child safe organization with a zero tolerance for abuse, to creating a safe community for children; and to developing a culture within INCA that has the best interests of the child as its priority. The purpose of this policy is to set out common values, principals, and beliefs, and to describe the steps that will be taken to meet INCA's commitment to protecting children. It applies to all full time and part-time staff, board members, volunteers, sponsors, and other representatives of INCA, and to all forms of communication with and regarding children. All share a common responsibility and commitment to the awareness, prevention, reporting of and responding to child abuse and are encouraged to actively participate in building and maintaining a child safe environment.

MISSION OF INCA

INCA's work is inspired, motivated and exemplified by the life of Jesus Christ. He is our guide, our leader and our hope. INCA works to eradicate injustice by empowering men and women living within situations of injustice to advocate for the rights of their children, families and communities in peaceful and impactful ways.

Biblical themes of justice, compassion and grace relate particularly to the poor and oppressed, the orphans, widows and strangers. Micah 6:8 states clearly that what God requires is that we do justice, love kindness and mercy, and walk humbly with our God. God confers on all people their worth and dignity, as is evident in creation and in the death and resurrection of Jesus Christ for all people. Jesus called us to love our neighbors as ourselves, reflecting a profound respect for others as equal in worth before God. Justice means restoring right relationships between people and God, between people as groups and individuals, and between people and creation. (Isaiah 58:3-13)

DEFINITIONS

Child - means a person below the age of 18 years, unless the laws of a particular country set the legal age for adulthood either older or younger. This child protection policy applies to all children whatever their race, religion or abilities; whatever they think or say; whatever type of family they come from; what language they speak; what their parents do; whether they are boys or girls; what their culture is; whether or not they have a disability; and whether they are rich or poor (UNICEF 1989 Convention on the Rights of the Child).

Child Abuse - means all forms of physical and/or emotional ill treatment, sexual abuse, neglect or negligent treatment of a child, or commercial or other exploitation of a child resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power (WHO 1999 Consultation on Child Abuse Prevention).

Child Abuser - means a male or female of any social, cultural or economic group and of any age, including family members, people within the child's community or institutions who engages in child abuse.

Representatives – means INCA's full time and part-time staff, board members, volunteers, sponsors and any other persons representing INCA or participating in activities supported by INCA.

CHILD PROTECTION POLICY

1. All INCA staff, board members and volunteers shall receive and acknowledge by signature a copy of this Child Protection Policy.
2. All INCA staff and board members shall have a criminal record or police background clearance. Full time staff should have a criminal check repeated every five years.
3. All Representatives shall sign and adhere to the Code of Conduct forming part of this Child Protection Policy before visiting a child.
4. Representatives shall arrange all visits with sponsored children or visits to programs involving children through International Needs Canada and the partner organization.

REPORTING AND RESPONSE

1. Development of an effective reporting procedure and response plan for handling any allegation or suspicion of alleged child abuse enhances efforts to protect children from abuse. Child abusers are not likely to remain in an environment where workers are trained to report suspicious behavior. Child abusers thrive on secrecy and are more likely to commit child abuse when they are unnoticed, or when they are in an environment in which others are naïve or insensitive to the possibility of child abuse.
2. In reporting child abuse:
 - The dignity and rights of every child are to be respected.
 - In interviewing and reporting on children, special attention is to be paid to each child's right to privacy and confidentiality, to have their opinions heard, to participate in decisions affecting them, and to be protected from harm and retribution.
 - The best interests of each child are to be protected over any other consideration, including over advocacy for children's issues and the promotion of child rights.
 - When trying to determine the best interests children, their rights to have their views taken into account are to be given due weight in accordance with their age and maturity.
 - Those closest to the child's situation and best able to assess it are to be consulted about the political, social and cultural ramifications of any reporting.
 - A story or an image is not to be published when it might put the child, siblings or peers at risk, even when identities are changed or obscured.
3. A reporting plan includes the following:
 - Any knowledge or suspicion of child abuse must be reported immediately to the executive director of INCA and where mandated by law, to the police and other appropriate authorities.

- An in-house investigation will be conducted which shall not interfere with the work of the police or other appropriate authorities.
- A plan for responding to the results of an investigation will be developed that includes consideration for the welfare of the child.

PROTECTION OF CHILDREN IN SPONSORSHIP PROGRAMS

1. INCA staff members (particularly tour leaders) shall be familiar with procedures relating to sponsor visits, including the need to report unannounced/unaccompanied visits.
2. INCA staff members involved in sponsorship programs shall receive awareness raising and training about the need for child protection, strategies to protect children, and the detection of possible irregularities in requests related to sponsorship.
3. A sponsored child's history, picture folders and photographs of children shall be stored in locked and secure facilities to which only a limited number of people shall have access.
4. All sponsor correspondence with a sponsored child shall be reviewed for inappropriate or suggestive comments, requests or obscenities. In the event of inappropriate correspondence being discovered, INCA may decline sponsorship or sever the sponsorship relationship.
5. At the time of sponsorship, sponsors should be advised that INCA's policy prohibits unannounced visits.
6. A sponsor and his/her sponsored child shall not exchange home addresses.
7. INCA shall not facilitate the visit of any child to his/her sponsor or facilitate the adoption of children.

COMMUNICATION ABOUT CHILDREN

1. Communication about children includes all promotional materials and newsletters, recruitment documents, advertisements, application forms, and website. INCA should use pictures that are decent and respectful, not representing them as victims. Children should be adequately clothed and should not strike poses that could be interpreted as sexually suggestive. Language that implies a relationship of power should also be avoided. Instead language that highlights their dignity, resilience, capacity and growth should be promoted.
2. INCA websites should not use scanned images of children without formal permission of the partner responsible for the program and the parent(s)/guardian(s) of the child. This permission should be in writing as much as possible, and may be part of the packet of documents signed by the child's parent(s)/guardian(s) when the child joins the sponsorship program.
3. Personal and physical information that could be used to identify the location of a child within a country should not be used on the INCA web site or in any other form of communication about the child.

GENERAL CONFIDENTIALITY

1. INCA vigilantly protects confidential information about children and their families.
2. Information about a child abuse incident is shared with people on a "right" and on a "need to know" basis as deemed necessary. Names and identities are not to be disclosed outside the group designated as "need to know".

3. Posting information (such as last names and villages) about any sponsored child shall be explicitly discouraged.
4. Faxing of information is discouraged unless absolutely necessary. Generally, titles on electronic mail messages should be innocuous and flagged as confidential.

Policy to be signed by ALL staff, board members and volunteers

Name _____
(Please Print)

Role _____

Signature _____

Date _____

CODE OF CONDUCT

All representatives shall sign and adhere to a code of conduct and behavior that defines appropriate behavior and interactions with INCA sponsored children and other children involved in programs and projects supported by INCA. Please initial each statement.

- _____ I will not visit an INCA sponsored child or a child involved in a program supported by INCA without a local member of a partner's staff present with me at all times. I recognize that I am not permitted to visit any such child independently and that all visits, both now and in the future, must be coordinated and approved in advance by INCA in order to insure the safety of children.
- _____ I will never act in any way that will shame, humiliate, or perpetrate any form of verbal, emotional, sexual or physical abuse on a child.
- _____ I will not give any personal contact information to an INCA-sponsored child nor will I ask for the child's contact information.
- _____ I will not be alone or travel alone with a child. I will be engaged in children's activities in open or visible places.
- _____ I will never use inappropriate language, physically strike children, or develop physical or sexual relationships with children.
- _____ I will always be responsible for maintaining an appropriate relationship, even if a child behaves inappropriately.
- _____ I will not place myself in a compromising or vulnerable position and will stop any interaction with a child if a child says to stop, or if a child appears uncomfortable with the interaction.
- _____ I will dress in culturally appropriate ways.
- _____ I will not act flirtatiously with any child or touch any child inappropriately. To avoid misunderstanding, I will ask a child for permission before touching or holding hands. Inappropriate touching shall include, but is not limited to, touching children in areas that are normally covered by shorts and shirts, and picking up, lap-holding, hugging, kissing or tickling inappropriately.
- _____ I will not solicit a dating relationship with an INCA-sponsored child or youth.
- _____ I will not discipline a child in any way.
- _____ I will not post identifying information of any children on Facebook or the internet.

- _____ I will speak about children with respect for their dignity, resilience, capacity and growth.
- _____ I will report all child abuse incidents which I observe or learn about.
- _____ I will promote the enforcement of disciplinary measures that are based on Biblical principles of dignity and value of children, teach children responsibility, and reflect reasonable expectations for the age of the child.
- _____ I recognize that I may face substantial adverse consequences for breach of this code of conduct.
- _____ I am aware that allegations of abuse will be reviewed and, as determined necessary by INCA, investigated. I recognize that, if I violate this code of conduct, I may be subject to applicable local laws and to organizational disciplinary measures.

Code of Conduct to be signed by all representatives BEFORE visiting a child in an INCA project.

I _____ have read and understood **INCA's Child Protection Policy**, including the **Code of Conduct**. I agree to abide by this Code.

Name _____
(Please Print)

Role _____

Passport number _____

Country of Issue _____

Signature _____

Date _____

INTERNATIONAL NEEDS CANADA
Application for a Sponsor to Visit a Sponsored Child/Project



The following statement of responsibility sets the environment in which sponsor visits are permitted. All applications will be assessed in its light.

International Needs Canada affirms its commitment to the welfare of children and their protection from abuse and exploitation. Moreover, International Needs Canada upholds the UN Convention of the Rights of the Child (1989), Article 19, which states “State Parties shall protect the child [1] **from all forms of physical and mental violence, injury or abuse, neglect, maltreatment or exploitation, including sexual abuse.**”

We believe that child protection is both a corporate and an individual responsibility. Every person who shares in the work of International Needs Canada, including staff, volunteers, contractors, and supporters also shares in the responsibility to take every precaution to protect the children and families we serve.

How we care for the most vulnerable among us is an outward expression and evidence of our love for God and all His creation.

Complete the following:

- Fill out the Sponsor Visit Application Form
- Read the Child Protection Policy
- Obtain a Police Check - www.backcheck.ca/inc
- Scan a copy of your Passport

Please mail to:

International Needs Canada
210 - 4031 Fairview St
Burlington ON L7L 2A4

Email: sponsorship@internationalneeds.ca

SPONSOR VISIT APPLICATION FORM

(please fill in one form for each person visiting)

SPONSOR/VISITOR INFORMATION

First and Last Name: _____ **International Needs donor ID#:** _____

Passport Number: _____ (attach a copy of the first two pages of your passport)

Address: _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Email: _____

SPONSORED CHILD INFORMATION

Sponsored Child's Name: (1) _____ **Child ID#:** _____

(2) _____ **Child ID#:** _____

(3) _____ **Child ID#:** _____

(4) _____ **Child ID#:** _____

Desired Date(s) of Visit: _____

Arriving From: _____ **Airport/Bus Station/Port Name:** _____

Time: _____ **Date:** _____ **Flight Number:** _____

Departing From: _____ **Airport/Bus Station/Port Name:** _____

Time: _____ **Date:** _____ **Flight Number:** _____

On which day would you prefer to visit your child? _____

Where will you be staying during your visit to the country? (Ex. Name and Address of Hotel)

_____ **Phone:** _____

Purpose of visit: Tourist Business Other Explain: _____

Are you prepared to meet the costs of visiting your sponsored child? Yes No

Approval of this application is needed by (Date): _____

I have read the Sponsor visit document and understand International Needs Canada’s policy regarding visiting sponsored children. I have completed my application and understand that approval to visit my sponsored child will be granted or denied at the discretion of the Field Director in the country where my sponsored child lives.

Name: _____
(Please Print)

Signature: _____ **Date:** _____