



**SIFAT**

2944 County Road 113, Lineville, Alabama 36266  
 Phone: 256-396-2015 Fax: 256-396-2501 [www.sifat.org](http://www.sifat.org)

**SIFAT TEAM LEADER CHECKLIST**

**Team Name** \_\_\_\_\_

**Date of Trip** \_\_\_\_\_

**Destination Country** \_\_\_\_\_ **Project Site** \_\_\_\_\_

Please use this checklist to help ensure you are following all team procedures in a timely manner. If you have any questions, please contact team coordinator Peggy Walker, [perdidopeg@aol.com](mailto:perdidopeg@aol.com), at any time. SIFAT is here to serve you and desires that your team’s experience is the best and most effective possible!

Step	Date Completed	Task
1		Contacted SIFAT representative for STM possibilities.
2		Reserved team date, project site, pricing information and SIFAT team number, all of which will be confirmed upon receipt of deposit.
3		Held recruiting meeting for potential team members.
4		Collected and sent \$200 deposit per person to confirm team date. This nonrefundable deposit is due one month after reservation is made.
5		Airline reservations and price confirmed by SIFAT representative (if applicable). Teams electing not to reserve airline tickets through SIFAT must consult and coordinate with SIFAT prior to making reservations.
6		Made plans to attend Team Leader Training (TLT) on _____.
7		Received _____ team manuals at TLT.
8		Made copies of forms and distributed to team members or have team members fill out forms on SIFAT’s website, <a href="http://www.sifat.org">www.sifat.org</a> .
9		Received SIFAT statement reflecting deposit received and total amount due including r/t airfare if applicable. Payment due dates noted and recorded below.
10		Confirmed all team members have passports. Passport expiration dates must be good for <b>at least six months</b> after return date of mission trip.
11		Checked with Health Department and CDC ( <a href="http://www.cdc.gov">www.cdc.gov</a> ) for immunizations recommended and required. Advised team members to obtain immunizations.
12		Determined need for and set dates for fundraising and team development activities.
13		Sent Preliminary Name List (list must include name, gender and birth date) to SIFAT for airline reservations. Date due to SIFAT _____.
14		Sent Final List of Names and Passport Numbers as they appear on the passports for airline reservations. Date due to SIFAT _____.
15		Sent first payment for in-country expenses. Date due to SIFAT _____.
16		Sent final payment to SIFAT for r/t airfare (if applicable). Date due to SIFAT _____.

17		Collected completed SIFAT team forms and one copy of passport photo page from all members. Made copy of all forms and passport photo pages for team leader to take on the trip.
18		Sent all forms, copies of photo page of passport and team commitment form with legible team roster to SIFAT – due TWO months prior to departure – kept one complete copy of all forms for my team leader travel packet.
19		Sent final payment for in-country expenses and team construction funds/health training funds. Date due to SIFAT _____.
20		Completed SIFAT cross cultural training manual with team members.
21		Set date for reunion meeting with team members and SIFAT representative (if possible)
22		Set date for packing party.
23		Had “sending forth” with church and other STM senders.
24		Had post field reunion meeting with team and determined a plan of action for continued support with SIFAT and project.
25		Stayed involved with SIFAT during the year by becoming a SHAREholder and through programs on the international campus in Alabama. (Practicum, Learn & Serve, retreats, special projects)
26		Set team date with SIFAT for next year’s team!

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**SIFAT Emergency Contact Phone Numbers:** (please distribute to team members to leave with family and church in case of emergency.) In case of emergency, contact the SIFAT office or one of the following persons. They will be able to relay a message to the individual and/or team.

Peggy Walker (256) 770-3955 (cell) / (256) 357-4807 (home)  
Tom Corson (256) 282-9298 (cell) / (256) 357-9106 (home)  
Marie Lanier (SIFAT-night) (256) 396-2900 (home)  
Ivan Roman (256) 276-0141 (cell) / (256) 596-3139 (home)  
Ken & Sarah Corson (256) 357-2608 (home)