***YOUTH WITH A MISSION***

YWAM Tumaluntung (Manado), Indonesia

**APPLICATION FORM**

Attach

Photograph

Here

(3x4)

This application will be considered only when all the items listed below are received by the Registrar Office of Youth With A Mission, Tumaluntung.

* Completed application, medical and consent forms, including signatures and all requested information.
* Non-refundable application fee of Rp200,000*(approx. $1 = Rp 8,500)*
* Photograph – a recent picture of yourself *(2 passport photos)*
* 2 Confidential Reference Forms completed by:
1. Your employer or YWAM school or base leader if you have

previousYWAM involvement

1. Christian friend who has known you for longer than 2 years
* Pastor’s Confidential Reference Form

I wish to apply for the following:

Please mail completed form to:

THE REGISTRAR

P.O. Box 1417 Manado

Sulawesi Utara 95381

Indonesia

Or

**ship4indo@yahoo.co.id**

❒School ❒Staff Position ❒Volunteer Staff

(Minimum 2 years) (Special Arrangement)

Specify School / Staff position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Starting Date*(month/day/year)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I. PERSONAL INFORMATION:**

❒Mr ❒Mrs ❒Miss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 First Middle Last Nickname

Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PO Box / Street City

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 State/Province Zip/Postal Code Country

Phone *(home & mobile)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: ❒Male ❒Female Place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Passport No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Highest Level of education completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status: ❒Single ❒Married ❒Engaged ❒Separated ❒Divorced ❒Widowed

Spouse’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fiancé/ée`s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you children /dependents be accompanying you? ❒Yes ❒No If so, please list below:

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | AGE | BIRTH DATE | RELATIONSHIP |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Do you need information on schooling? ❒Yes ❒No Specify Grade Level: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. EMERGENCY CONTACT:**

In case of emergency, Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone *(landline/mobile)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**III. PASTOR /CHURCH INFORMATION:**

Pastor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Denomination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IV. CHRISTIAN LIFE:**

On a **separate** sheet of paper(s)**type** or **print** the answers to the following questions:

1. Describe your conversion experience in three stages: Pre-Christ, Conversion, Present Relationship
2. What has been your church involvement thus far?
3. What experience in Christian leadership have you had?
4. How did you hear about Youth With A Mission? Please be specific.
5. **Student Applicant**: Why are you applying to take part in this program?

**Staff Applicant**: Why are you applying for this staff position?

1. Please indicate your financial position in relationship to the program, school or ministry for which you are applying.
2. List anything else we should know about you and your situation.

**V. CONSENT FORMS:**

**A. Youth With A Mission – Statement of Purpose**

Youth With A Mission (YWAM) is an international movement of Christians from many denominations dedicated

to presenting Jesus Christ personally to this generation, to mobilizing as many as possible to help in this task,

and to the training the equipment of believers for their part in fulfilling the Great Commission. As Christians of

God`s Kingdom, we are called to love, worship, and obey our Lord; to love and serve His Body, the Church; and

to present the whole Gospel for the whole man throughout the whole world.

We, of Youth With A Mission believe that the Bible is God`s inspired and authoritative word, revealing that

Jesus Christ is God`s Son, that man is created in God`s image, that He created us to have eternal life through

Jesus Christ, that although all men have sinned and come short of God`s glory, God has made salvation

possible through the response to God`s initiative of grace toward us, that God desires all men to be saved and

to come to the knowledge of the truth, and that the Holy Spirit`s power is demonstrated in and through us for the

accomplishing of Christ`s last commandment, ***“Go ye into all the world and preach the Gospel to every***

***creature.”*** (Mark 16:15)

I confirm that I understand that payment of the required fees must be guaranteed upon or before my arrival,

unless otherwise arranged with leadership before departing from the program. I also confirm that I am fully

aware of my financial obligations. I therefore commit myself to paying personal expenses incurred during my

involvement with Youth With A Mission, Tumaluntung.

I have completed all portions of this application for admission to the program for which I am applying and if I am

accepted by Youth With A Mission, Tumaluntung, I will abide by the spirit, rules, and schedule of

YWAM.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B. PERSONAL INFORMATION**

Colour of Hair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Height: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Colour of Eyes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Colour of Skin: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Blood Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Eye-glasses/Contact Lens: ❒Yes ❒No

Identifying scars or birthmarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**C. CONSENT AND AGREEMENT**

I do hereby release, YOUTH WITH A MISSION, INDONESIA, its agents and volunteer assistants from

any liability whatsoever arising out of any injury, damage, or loss which may be sustained by said person during

the course of involvement with Youth With A Mission.

Applicant`s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D. CONSENT FOR TREATMENT**

I hereby agree to the performance of such treatment, anesthetics, and operations as in the opinion of the

attending physician may deem necessary for me.

Applicant`s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E. CONSENT FOR BURIAL (For Foreigners only)**

In the case of accidental death, some Asian nations require by law either immediate entombment or cremation.

For the purpose of governmental formalities, please sign the following statement:

I, the undersigned, hereby grant consent to whatever national laws require, in the eventuality of my death while

in the service of Youth With A Mission. I acknowledge that Youth With A Mission is under no obligation to

underwrite the cost of shipping my body to another country in the event of my death.

Applicant`s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***"To know God and make Him known"***