

C. CHRISTIAN LIFE AND MINISTRY

1. Describe your present relationship and devotional life with the Lord..

2. How did you first come into contact with YWAM?

3. Who or what influenced your to apply to YWAM Cluj-Napoca?

4. What do you think are your calling and gifts?

5. What expectations do you have about serving with YWAM Cluj-Napoca?

6. Staff are generally required to work in an area of support work as well as training/outreach ministries. Please indicate which areas you are most interested in. (You may check more than one.)

SUPPORT MINISTRIES

- Accounting
- Childcare
- Computers
- Hospitality
- Kitchen
- Landscaping
- Mercy Ministry
- Pastoral Care
- Personnel
- Purchasing/Supplies
- Secretarial
- Worship Team

LIVING ALTERNATIVES

- House of Joy

BUILDING MAINTENANCE

- Carpentry
- Construction
- Electrical

COMMUNICATIONS

- Video
- Graphics
- Writing/Editing
- Web Design

SCHOOLS

- Discipleship Training School (DTS)
- School of Ministry and Personal Development (SMPD)
- Pro-life DTS

7. What length of service do you anticipate? _____

D. EXPERIENCE AND EDUCATION

1. Please summarize your school history.

Have you ever completed high/secondary school? Yes No If not, up to what year did you complete? _____

High School/Secondary School/College/University/Seminary Attended: _____

Name Address Dates Attended Degree

2. Have you previously attended a YWAM school? Yes No

If you have, list: School(s) Location Dates attended

a. Lecture phase: _____

Outreach phase: _____

b. Lecture phase: _____

Outreach phase: _____

c. Lecture phase: _____

Outreach phase: _____

3. Have you ever been on YWAM staff? Yes No

If you have, list: Position Location/Dates Supervisor

4. Are you an ordained minister? _____

5. Describe any other ministry experience (use a separate sheet if necessary): _____

6. Describe musical experience and proficiency: _____

E. FINANCES

1. Are you in debt? Yes No (If you are, please explain) _____

2. Would your debt interfere with your long-term commitment? _____

3. Do you have monthly pledged support? Yes No How much? _____

4. If you do not have monthly support, how do you plan to support yourself if accepted on staff? _____

F. LEGAL INFORMATION

1. Are you involved in any current or pending lawsuits or legal proceedings? Yes No (If you are, please explain)

2. Do you have a police record (civil or military)? Yes No (If you do, please explain)

G. REFERENCES

In order to process your application we need 3 reference forms. Please give us the following information:

1. Your YWAM DTS leader or base leader:

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

2. Your current employer or current YWAM supervisor (if applicable):

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

3. Your pastor or elder:

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

a. Church Denomination: _____

b. Does your pastor or elder know that you are applying for YWAM staff? Yes No

c. Please describe your present relationship with your pastor or elder and home church: _____

Note: Would you like us to contact your pastor or elder personally and introduce our ministry to him? Yes No

H. HEALTH INFORMATION

1. Do you now, or have you ever received any compensation for disability from any source? Yes No (If yes, please explain): _____

2. Do you have any physical impairments, handicaps or health conditions that require special attention? Yes No (If yes, please explain): _____

3. Have you ever had any past psychiatric treatment? Yes No (If yes, please explain): _____

4. Do you have medical insurance? _____

a. Name of Insurer: _____

b. Medical Insurance Number: _____

c. What does your medical insurance cover? (Briefly): _____

CONSENT FOR TREATMENT

I hereby agree to the performance of such treatment, anesthetics, and operations as in the opinion of the attending physician are deemed necessary on:

Applicant's Signature: _____ Date: _____

RELEASE OF LIABILITY

I do hereby release Youth With A Mission, Inc., its staff and volunteer assistants from any liability whatsoever arising out of injury, damage, or loss which may be sustained by the said person during the course of involvement with Youth With A Mission, YWAM Directors of staff by means of reconciliation or arbitration; and waive any right to pursue by way of litigation.

Applicant's Signature _____

Parent/Guardian Signature (if applicant is under 18) _____

Date _____

Date _____

1. Which one of the following would best describe the applicant's Christian experience?

Mature Contagious Genuine and growing Over-emotional Superficial

Comments: _____

2. With reference to his/her Christian service, he/she is Dedicated Average Casual

Comments: _____

3. Does he/she display high moral standards? Yes No Explain: _____

4. What do you feel are the applicant's motives in applying to this program?

Christian service Desire to spread the gospel Receive help/ministry Adventure
 Desire to help others Escape an unpleasant home situation Travel
 Other (Specify): _____

5. Please comment on the applicant's family background. _____

6. What do you consider to be the applicant's strong points? (include special abilities): _____

7. Please add any other pertinent remarks (ex: medical, psychological, drug or alcohol abuse, criminal record, eating disorders , homosexuality, occult activities, etc.) _____

8. What could YWAM do to aid in the applicant's personal development? _____

9. **(Pastors only)** Is your congregation/group standing behind the applicant with enthusiasm and prayer? _____

10. Would you recommend the applicant for acceptance to this YWAM program?

Yes With some reservations (Explain) No (Explain) _____

Signature: _____

Name (please print): _____ Phone: _____

Address: _____ State: _____ Zip: _____ Country: _____



Please return form to
YWAM Cluj-Napoca • Administration Department
P.O. Box 1-468 • 400750 Cluj-Napoca, Romania
Fax: +40 264-550-941 • ywamcluj.ro

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