



Youth With A Mission Singapore

Gateway to Asia

To know God and to make Him known

A: Geylang P.O.Box 25, Singapore 913801 **T:** 65-6745 9700 **E:** info@ywam.org.sg **W:** www.ywam.org.sg

GUIDE TO COMPLETING ASIA INTERNSHIP PROGRAM FORM

1. Application Form

Please complete and return to us **ALL** parts of the application form.

2. Medical Forms

The confidential Health Form requires some details to be completed by your doctor. Please note if you have any dependents 16 years or younger accompanying you, you will need to make copies of this form for their use.

- If you already have one on file, there is no need to complete this form as long as it is current within a two year period.

Medical Insurance : Overseas applicants are required to purchase Overseas Health Insurance for the duration of your time here. Or you can purchase your insurance with YWAM upon arrival.

3. Confidential References

A confidential reference form must be given to the following:

1. Pastor/spiritual leader
2. Current/most recent YWAM leader/school leader

Request that they complete the form and mail it **directly to the Go Centre**. To help us out, please list the names and addresses of these referees and attach this to your application form when you mail it in.

4. Visas (For all Overseas Applicants)

Please do not apply for a visa until you have received instruction and appropriate papers from us.

Please direct all forms to the following address:

Asia Internship Program

Youth With A Mission

P O Box 25

Geylang Road

Singapore 913801

Phone : 65 -6745 9700

Fax : 65 – 67477533

Email : gocentre@ywam.org.sg

Please attach a most recent photo of yourself

Application as an Asia Intern

This application is for official use and will be kept strictly confidential.
Please complete all questions by typing or printing in ink.

Part I – Personal Details			
Designation	<i>Rev/Dr./Mr/Mrs/Miss</i>		
Your Name	<i>Surname</i>	<i>Given Name</i>	
Permanent Address			
Phone	<i>Home</i>	<i>Work</i>	
Fax and Email	<i>Fax</i>	<i>Email</i>	
Emergency Contact Who do you want us to contact in an emergency?	<i>Name:</i> <i>Phone: Day</i> <i>Night</i> <i>Address:</i> <i>Relationship:</i>		
Birth Details	<i>Birth date</i>	<i>Place of Birth</i>	<i>Age</i>
Citizenship			
Passport Details	<i>Passport Number</i>	<i>Expiry Date</i>	<i>Place of Issue</i>
English Speaking Ability Excellent, good, fair or poor			
English Reading or Comprehension Ability Excellent, good, fair or poor			
Other Languages Spoken			
Marital Status Single, Engaged, Married, Separated, Divorced, Remarried, Widowed	<i>Spouse's Name (if applicable)</i>		
Children's Details Please attach a sheet of paper if necessary.	<i>Name</i>	<i>Sex</i>	<i>Date of Birth</i>

* Please use separate sheets of paper if space is insufficient for the below details.

Part 1 – Personal Details (Continued)

Education Name in order formal/professional education levels obtained. Include name of school and country, date attended and degree/certificate obtained. Include any bible training too.	<i>Name of school, country</i>	<i>Dates attended</i>	<i>Degree/certificate obtained</i>		
Past and present employment List all jobs, dates and position. Please also state your skills (i.e. plumbing, electrical work, sewing, administration, computer program etc.)	<i>Job title</i>	<i>Name of Employer</i>	<i>From Month/Year</i>	<i>To Month/Year</i>	<i>Skills</i>
Ywam Experience List previous YWAM experience/schools attended. Please include the location, period attended and director in charge.	<i>School attended/responsibility</i>	<i>From - To</i>	<i>Location</i>	<i>Director in charge</i>	
Church Affiliation (Most current)	<i>Church Name</i>		<i>Denomination</i>		
	<i>Pastor's Name</i>		<i>Address</i>		
	<i>Tel</i>		<i>Fax</i>		
	<i>Member since</i>				

Part II – Personal History
(Additional Information)

On separate sheets of paper, please prayerfully and concisely answer the following questions (print or type) and attach to this application form. This exercise will help you to be clear with what God is saying and doing in your life. It will also help us to serve you better.

1. Describe how the Lord guided you to be a part of YWAM Singapore's Asia Internship Program. Where (country) or which people group has God called you to serve?
2. What areas of ministry do you think you are most effective and/or comfortable in and least effective and/or comfortable in? Feel free to list more than one.
3. What spiritual gifts do you think God has given you? Reflect on the ways God has used you in the past.
4. What is your primary (can be more than one) passion/vision that you want to focus on in this program.
5. List any church work and/or YWAM experience. If you are an ordained or licensed clergyman, please elaborate.
6. List any previous involvement with other mission agencies/organisations. This includes short term involvement, staff or leadership appointments. What were your reasons for leaving?
7. We are committed to on-going discipleship in YWAM. Are there any critical, urgent personal issues you are currently working on that we can be of assistance to you or should be aware of?
8. Have you communicated to your church/pastor regarding your plan to serve in Asia? Describe their response and your relationship with your home church.
9. How did your family respond to your call to Asia? Please describe your family relationships.
10. In YWAM, all staff raise their own support for personal and ministry expenses. Indicate the monthly support you have raised so far. How do you intend to raise the outstanding amount? (If applicable).
11. Are you in debt? If yes, please elaborate.
12. Is there anything else you feel we should know about?

Part III - Declarations

RELEASE OF LIABILITY

I do hereby release Youth With A Mission Training Centre., its agent, employees 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
Name :

Date

CONSENT FOR TREATMENT

I do hereby agree to the performance of such treatment, anesthetics and operation as in the opinion of the attending physician/surgeon is deemed necessary on _____ (your name)

Signed : _____

Date : _____

If applicant is under 18 years of age, signature of parent or responsible party is required:

Your Name : _____

Signed : _____

Relationship : _____

Date: _____

CONSENT FOR BURIAL

In the case of accidental death, the law of the country may require that the body be buried or cremated. Whilst every attempt will be made to fulfill the family's wishes concerning the disposition of the deceased but this may not be possible.

I, the undersigned, hereby grant consent for the burial/cremation of my body in accordance with the law in that location, in the eventuality of my death while in the service of Youth With A Mission.

Applicant's signature
Name :

Date

DECLARATION

I declare all information declared in this application form and its attachments to be true and correct. I have not withheld any relevant information. If I am accepted as an Intern of YWAM, I agree to embrace the values of the mission, comply with the leadership structures in place in YWAM Singapore, abide by the general ministry policies, to respect the property of YWAM and its people in a spirit of true submission. I also agree to the use of (including the disclosure of) information supplied on my application form by the staff of YWAM for any purpose related to my Internship appointment, development or well being.

Applicant's signature
Name :

Date

Have you ever had any of the following?

Allergy	<i>No</i>	<i>Yes</i>	Surgery	<i>No</i>	<i>Yes</i>	Females Only	<i>No</i>	<i>Yes</i>
Penicillin			Appendectomy			Irregular periods		
Sulphonamides			Tonsillectomy			Severe cramps		
Serum			Hernia repair			Excessive flow		
Foods (specify)			Other (specify)					
Any other (specify)								

Have you ever had any of the following Communicable Diseases?

	<i>No</i>	<i>Yes</i>		<i>No</i>	<i>Yes</i>		<i>No</i>	<i>Yes</i>
Chicken pox			Measles (Rubella)			Measles (Rubeola)		
Scarlet fever			Tuberculosis			Hepatitis		
Mumps			AIDS/HIV			Pertussis		
Other (specify)								

Please provide details of any positive answers and give details of any other illnesses you have had.

Is there anything more about your health or physical condition that you feel we should know about?

Do you have any valid health insurance for travel overseas? (If yes, please specify)

FAMILY HISTORY

Have any of your relatives ever had any of the following?

	<i>No</i>	<i>Yes</i>	<i>Relationship</i>
Tuberculosis			
Diabetes			
Kidney Disease			
Heart Disease			
Arthritis			
Stomach Disease			
Asthma, Hay Fever			
Epilepsy, Convulsions			
Cancer			
Mental Illness			

**Part IV – Confidential Reference
(Referee 1)**

Name of Applicant _____
Last
First
Middle

Address _____

The above applicant has applied for application to be Internship with YOUTH WITH A MISSION (YWAM). YWAM is an international, interdenominational Christian missionary organisation founded in 1960. Its three fold purpose is evangelism, training and mercy ministry. We need your candid appraisal of the applicant’s suitability for the position. The information you give will be kept strictly confidential. Please leave blank any questions you feel you have inadequate knowledge.

What is your relationship with the applicant?

- Pastor/spiritual leader
- YWAM leader (specify: _____)

Thank you for your assistance on behalf of YWAM Singapore

Evaluation of the applicant’s overall characteristics:
 (Please tick appropriate boxes – tick more than one if appropriate)

<p>1. HEALTH</p> <input type="checkbox"/> Unhealthy <input type="checkbox"/> Fairly healthy <input type="checkbox"/> Excellent health	<p>8. RELIABILITY</p> <input type="checkbox"/> Unreliable <input type="checkbox"/> Inconsistent <input type="checkbox"/> Meets obligations <input type="checkbox"/> Very reliable
<p>2. CHRISTIAN EXPERIENCE</p> <input type="checkbox"/> Superficial <input type="checkbox"/> Over emotional <input type="checkbox"/> Genuine but mild <input type="checkbox"/> Warmly contagious	<p>9. PUNCTUALITY</p> <input type="checkbox"/> Always late <input type="checkbox"/> Sometimes late <input type="checkbox"/> Punctual <input type="checkbox"/> Usually early
<p>3. MENTAL ABILITY</p> <input type="checkbox"/> Learns & thinks slowly <input type="checkbox"/> Average mental ability <input type="checkbox"/> Alert, has a good mind <input type="checkbox"/> Exceptional; capacity	<p>10. FINANCES</p> <input type="checkbox"/> Compulsive at spending <input type="checkbox"/> Average <input type="checkbox"/> Responsible/honours obligations <input type="checkbox"/> Wisely budgets
<p>4. SELF DISCIPLINE</p> <input type="checkbox"/> No self discipline <input type="checkbox"/> Requires reminders <input type="checkbox"/> Average <input type="checkbox"/> Very self disciplined	<p>11. RESPONSIVENESS (to others feelings & needs)</p> <input type="checkbox"/> Slow to sense feelings <input type="checkbox"/> Reasonably responsive <input type="checkbox"/> Understanding & thoughtful
<p>5. TEAM WORK</p> <input type="checkbox"/> Avoids group activities <input type="checkbox"/> Always causes friction <input type="checkbox"/> Needs to have own way <input type="checkbox"/> Usually cooperative <input type="checkbox"/> Works well with others	<p>12. LEADERSHIP (ability to inspire others & maintain their confidence)</p> <input type="checkbox"/> Makes no effort to lead <input type="checkbox"/> Tries but lacks ability <input type="checkbox"/> Good leadership promise <input type="checkbox"/> Good leadership ability
<p>6 APPEARANCE</p> <input type="checkbox"/> Very smart <input type="checkbox"/> Average <input type="checkbox"/> Sloppy <input type="checkbox"/> Doesn’t care	<p>13. WILLINGNESS TO SERVE</p> <input type="checkbox"/> Reluctant to serve <input type="checkbox"/> Motives confused <input type="checkbox"/> Willing to serve <input type="checkbox"/> Eager to serve
<p>7. INITIATIVE</p> <input type="checkbox"/> Only does assigned work <input type="checkbox"/> No initiative <input type="checkbox"/> Starts/does not finish <input type="checkbox"/> Takes initiative	<p>14. FLEXIBILITY</p> <input type="checkbox"/> Unwilling to change <input type="checkbox"/> Reasonably adaptable <input type="checkbox"/> Open to change <input type="checkbox"/> Very adaptable

What involvement does the applicant have with his/her local church?

How would you describe the applicant's Christian experience?

With reference to the applicant's commitment to the Lord and present direction please comment on his/her suitability for an internship position with YWAM for which he/she has applied.

Please add any other relevant remarks.

I have know _____ for _____ months/year

Signed: _____ Date: _____

Name: _____

Address: _____

Tel: _____ Email address: _____

YWAM Singapore is called to work with the local church to take the gospel to those who have not heard. If you would like to receive more information about YWAM's training schools or ministries, we will gladly forward them to you.

- Yes, (Please describe your request) _____
- No. I am already updated on your ministry.

Please direct all forms to : Asia Internship Program
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