

P.O. Box 1380 • Lindale TX 75771-1380 • USA
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Email: info@ywamwoodcrest.com
Web: www.ywamwoodcrest.com

- Communications DTS (IDS 701/702)
- School of Writing (COM 378)
- Comm. and the Biblical View of Man (COM 301)
- Advanced Principles of Communication (COM 302)
- Internship (specify type): _____
- Other course (specify): _____

Course starting date: _____



Personal Information

Full name _____ Like to be called _____

Current mailing address _____

Permanent mailing address _____

Phone _____ Fax _____ Email _____

Gender: male female Date of birth (dd.mm.yy) _____ Blood type _____

Predominant ethnic background (see key below) _____ Height _____ Weight _____

- 1—American Indian/Alaskan native
- 2—Asian/Pacific islander
- 3—Black

- 4—Central Asian/Middle Eastern
- 5—Hispanic
- 6—White

Note: Admission to U of N is open to qualified individuals regardless of race, color, national or ethnic origin, gender, or educationally unrelated handicaps.

Marital/Family Status

- Single
- Engaged
- Married
- Separated
- Divorced
- Remarried
- Widowed

Spouse's name _____ Date of birth (dd.mm.yy) _____ Age _____

Is spouse accompanying you? yes no Are children accompanying you? yes no

Give names, dates of birth, and gender of children accompanying you:

Surname	First name	Birthdate (dd.mm.yy)	Gender

Emergency Information

In case of emergency, contact: _____

Name	Relationship to you

Full mailing address _____

Phone _____ Fax _____ Email _____

Known allergies (to drugs, etc.) _____

Home church _____

Church name	Denomination	
Pastor's name	Church mailing address	
Church phone	Church fax	Church email

Passport Information

Country of citizenship _____ Passport number _____

Full name as listed on passport _____

City/country/date passport issued _____ Expiry date _____

Note: If your spouse is accompanying you and is not completing a separate application, please give the above details concerning his/her passport on a separate piece of paper and attach it to your application.

Languages

Please indicate your proficiency in any languages you speak.

- | | |
|------------------------------------|---------------------------------|
| 1—elementary speaking | 4—full professional proficiency |
| 2—limited word proficiency | 5—native speaking proficiency |
| 3—minimum professional proficiency | 6—mother tongue |

Please list languages and proficiency levels _____

Educational Information

- I have not completed high/secondary school. I completed through grade _____
- I completed high/secondary school in _____ (year)
- I have completed some college/university.
- I completed college/university and earned this degree: _____
- Specify which college/university you graduated from: _____

Skills/Interests

Occupation _____ Years of experience _____

Other skills/talents/hobbies _____

Special interests: art athletics music public speaking writing other

Be specific: _____

YWAM Background Information

Schools/Courses

Have you attended YWAM schools/courses? no yes—If yes, list below and on extra paper.

School/Course/Outreach	Location	Leader	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you pursuing a degree program with University of the Nations? no yes
 If yes, what degree level? Associate Bachelor Master Doctorate
 Which U of N college? _____ What degree? _____

STAFF

Have you ever been on YWAM staff? no yes—If yes, please list the following information:

Position	Location	Supervisor	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References

You will need to give reference forms to your pastor, to a friend, and to your work supervisor (or a teacher). They should return the reference forms directly to us, so you will need to give them a stamped envelope addressed to:

Registrar • YWAM Woodcrest • P.O. Box 1380 • Lindale TX 75771-1380 • USA

Please list the contact information for your references below:

Pastor	Friend
Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone (_____) _____	Phone (_____) _____
Email _____	Email _____

Work Supervisor or Teacher	YWAM Leader (only for applicants currently in YWAM)
Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone (_____) _____	Phone (_____) _____
Email _____	Email _____

Note: If you are currently in YWAM, you will only need one reference—the one from your YWAM leader.

Financial Information

Do you have outstanding debts (including for YWAM courses)? no yes—If yes, please explain:

 Will you be paying your total course fees upon arrival? yes no—If no, how will you take care of them?

Applicant's Declaration

- I commit to pay all expenses incurred during my involvement with Youth With A Mission.
- I declare that all information in this application is correct to the best of my knowledge.
- I will abide by the spirit, policies, and schedule of this YWAM program.

Applicant's signature _____ Date (dd.mm.yy) _____