

YLIT'S APPLICATION FORM

PLEASE PRINT OR TYPE ALL YOUR ANSWERS

PLACE ONE PHOTO WITH APPLICATION

SEND APPLICATION TO : Singing Waters Ministries/ Swan David and Lise

673394 Hurontario St, RR#1
Orangeville, ON, L9W 2Y8
Canada

Date of Application: M ___ D ___ Y ___

PERSONAL INFORMATION

Last name: _____

Name : _____

Country : _____

Birth date : m _____ d _____ y _____

Telephone numbers:

Home# _____ Work# _____

Fax# _____ E-Mail _____

Current Address:

Permanent Address:

Emergency Contact

Name: _____

Address: _____

Phone: _____ Relationship to you: _____

PASSEPORT INFORMATION

Name on passport _____

Citizenship _____

City or Country where Passport was issued

Passport number _____ Date of issue M____D____Y____

Expiry Date _____

Nationality _____ Birth place _____

Do you have a criminal record? Yes NO

(This question is for immigration purposes only)

DATE YOU WOULD LIKE TO COME

Notice: the number of our accomodations are limited, we will let you know if we can welcome you the dates you have submitted.

PERSONAL HISTORY

Ear Trouble ? Allergies, including food allergies ? Other

Are you at present under the care of a doctor for any condition?

If Yes, please specify: Yes ? No ?

Are you taking any medication at this time? Yes ? No ?

If Yes, please specify:

Are you allergic to any medications? Yes ? No ?

If Yes, please specify:

Do you have a history of emotional instability or psychiatric treatment?

If Yes, please specify: Yes ? No ?

Do you now, or have you ever, receive compensation for disability from any source?

If Yes, please specify: Yes ? No ?

Do you have any physical impairments, handicaps or health conditions which require special attention including food allergies? Yes ? No ?

If Yes, please describe:

What is your blood type ? _____

How would you rate your health?

Excellent ? Good ? Fair ? Poor ?

LIFE HISTORY

Please answer the following questions in a clear printing style or typed using your computer. Please do not write. Answer as completely as possible.

Spiritual growth

A_ Outline your conversion and the events and steps leading up to that time.

Relationships and experience

B_ Please take one full page each to describe your relationship with
C_ our mother and your father.

D_ Briefly describe your relationship with the rest of your family.

E_ How does your family feel about your intentions to attend the Young Leaders In Training program?

F_ What languages do you speak and how proficiently?

Goals and expectations

G_ Comment briefly on the circumstances that led up to your decision to apply for this school

H_ What are your reasons for wanting to attend this Program?

I_ What are any unhealed areas in your life?

God's work

J_ Have you ever experienced a miracle in your life? Please describe it.

K_ What do you think your spiritual gifts are?

We realize that the following questions are very personal. Please be assured that all answers are held in strict confidentiality and are not the basis of your acceptance to the program. If you have difficulty communicating your answer in writing, David and Lise Swan (YLITPastors) can talk with you personally.

Please answer in detail. One sentence is not sufficient

1. Have you used any of the following substances? If so, please explain how recently, in what quantities and what ministry you have had to overcome any addictions:

- a. alcoholic beverages,
- b. tobacco,
- c. "soft drugs" (e.g. marijuana)
- d. "hard drugs" (cocaine, heroin, chemicals).

2. Have you ever had psychiatric treatment?

If so, please describe the treatment received, dates, any lingering difficulties.

3. Have you ever been involved in any of the following areas? If so, please explain the circumstances briefly, the time and length of involvement and what ministry you have had to overcome them:

- a. the occult;
- b. a cult or sect, (new age, eastern mysticism, naturalistic philosophies Mormonism, Jehovah's Witnesses, etc.);
- c. heterosexual sin, including pornography and promiscuity;
- d. homosexual activity;
- e. compulsive behaviors, (shopping, eating, washing, scratching, etc.);

4. Do you have a history of abuse? Either verbal, physical, emotional or sexual.

WORK HISTORY and EXPERIENCE

a. Please include a resume or history of your work experience.

b. Please include your involvement in special interest courses, musical abilities, artistic talents and hobbies.

We require

2 x Friend / Co-Worker references

1 x Pastor reference

Your application will NOT be processed until we receive all your reference forms. Please ensure that all your referees complete and send them into our office as soon as possible.

References - Friend / Co-worker

Please list the people to whom you gave your reference forms.

Name _____

Address _____

Phone _____

Name _____

Address _____

Phone _____

Pastoral Reference

Enclosed is a reference form and letter for you to give to your pastor. We want to invite his/her counsel and input with regards to your application.

Home Church _____

Denomination _____

Pastor's Name _____

Address _____

Phone _____ Fax _____

Is your Pastor in agreement with your plans? Yes ? No ?

How long have you attended this church? _____

What size is the church? _____

How would you describe your relationship with your pastor?

FRIEND / CO-WORKER Reference Form (Confidential)

Name of Applicant _____

We would appreciate it if you would supply the information requested on this form, in order to aid us in evaluating the applicant's suitability for admission.

Your name _____

Address _____

Phone _____ Occupation _____

1) What is your relationship to the applicant, (leader, friend)?

2) How many years have you known the applicant?

3) What do you perceive to be the applicant's best qualities?

4) What do you perceive to be the applicant's greatest weakness(es)?

5) How do you think the Young Leader Program will aid the applicant's development?

6) What ministry or spiritual gifts have you observed in operation in the applicant?

7) Have you any reservations about the applicant attending the Young Leader Program?

8) Do you know of any incidents or examples in which the applicant compromised his or her Christian faith or moral integrity?
If so, please explain, including how it was resolved.

9) Please rate the applicant's ability to get along with his or her peers:
Outstanding ? Excellent ? Good ? Fair ? Poor ?

10) Please rate the applicant's ability to relate to authority:
Outstanding ? Excellent ? Good ? Fair ? Poor ?

11) Please rate the applicant's ability to relate to unbelievers:
Outstanding ? Excellent ? Good ? Fair ? Poor ?

12) Please rate the applicant's leadership skills:
Outstanding ? Excellent ? Good ? Fair ? Poor ?

13) Please rate the applicant's ability to overcome adversity:
Outstanding ? Excellent ? Good ? Fair ? Poor ?

Signature _____ Date _____

Please direct all forms to: Singing Waters Ministries/ Swan David and Lise
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Orangeville, ON, L9W 2Y8
Canada

PASTOR'S Reference Form (Confidential)

Name of Applicant _____

We would appreciate it if you would supply the information requested on this form, in order to aid us in evaluating the applicant's suitability for admission.

Pastor's Name _____

Home Church _____

Denomination _____

Address _____

Phone _____ Fax _____

1) How long have you known the applicant? ____ ? Month(s) ? Year(s)

What is your position in the church?

Pastor ? Elder ? Other ? _____

2) How well do you know the applicant?

Very well ? Well ? Casually ?

3) Were you aware of the applicant's intention to participate in this training program prior to receiving this form?

Yes ? No ? (comments) _____

4) Are you happy with his/her intentions?

5) In what activities has the applicant participated since attending your church?

6) Has he/she shown effectiveness in these activities?

7) Does the applicant tithe regularly to the church?

Yes ? No ? Unsure ?

8) Upon your observation, do you see the applicant as financially responsible?

Yes ? No ? Unsure ?

9) In your association with the applicant, what has been the level of commitment you have seen?

Faithful ? Inconsistent ? Other? (comments:)

How does the applicant usually react to trying situations
withdraws ? gets discouraged ? gets angry ?

meets constructively ? accepts patiently ? other (explain)..... ?

Evaluation of applicant's emotional maturity.

-Outstandingly mature. Has a proven ability to operate under stress and pressure ?

-More mature and emotionally stable than average ?

-Possesses adequate emotional stability and maturity?

-Doubtful. Experience has shown that the applicant might not be able to handle trials?

Additional Comments: _____

10) Please comment on areas of weakness you might be aware of.

11) Please comment on the family background.

12) Overall, what do you consider to be the applicant's strong points? (include special abilities)

13) What changes have you noticed in the applicant's life as they progress in God?

14) What could the Young Leaders in Training program do to aid the applicant's development?

15) Do you recommend this person for admission to this training program?

To the best of my knowledge the above information is correct and I believe that he/she possesses the qualities indicated above.

Signature _____ Date _____

Thank you for your time and help with this application.

Please send this confidential reference form directly to:

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