

Discipleship Training School

Youth With A Mission West Virginia @ Keyser

Do you understand what it means to truly know God?

Do you long to hear the Lord's voice daily?

Do you desire to make an impact on your world?

Do you want to know the destiny God has for your life?

Do you want to be ruined for the ordinary?

If your answer to any of the above questions is yes, then join us for YWAM West Virginia missions training, Discipleship Training School (DTS).

The five-month DTS is to help you develop a dynamic love relationship with Jesus and cause you to want to obey Christ's last command, "Go and make disciples of all nations..." (Matt. 28:19). We desire to send forth laborers to the mission fields of the world—from the jungles of the Amazon to the concrete jungles of New York City.

The DTS program emphasizes heart transformation and character development, not the accumulation of knowledge. It's a journey to discover the heart of God and learn His ways. In DTS, knowing God personally and intimately is the bottom line.

DTS is an intense, seven-day-a-week, spiritual "boot camp" designed to lay a foundation in your life which will equip you to make a dynamic difference in your world! DTS is a prerequisite for those interested in joining our full-time mission staff.

Since DTS is a registered school with the University of Nations (U of N), you receive 20 credits upon completion of the DTS. Alternatively, you can receive 17 credits through Ecclesia College, Springdale, Arkansas. Ecclesia College is nationally accredited with the Association for Biblical Higher Education and can be found at www.ecollege.edu.

COURSE CONTENT

DTS is divided into two phases, a three-month classroom phase followed by a two-month outreach phase.

I. CLASSROOM PHASE

The first three months of the DTS include the following aspects:

A. CLASSROOM CURRICULUM

You will receive powerful teaching from Christian leaders and experienced missionaries on topics such as:

1. Hearing God's voice and intercession
2. The character and ways of God
3. Relationship with God and others
4. Personal character development
5. Worship and spiritual warfare
6. Gaining God's heart for a lost world
7. Evangelism and world mission
8. Inductive Bible Study

B. SMALL GROUPS/DISCUSSION GROUPS

Small groups create an opportunity for students to ask questions regarding the teaching, share what God is doing in his/her life, and receive prayer and support from the group.

C. INTERCESSION GROUPS

Intercession is prayer where we identify ourselves with existing needs, seek the Lord's direction on how to pray, and His intervention in that particular situation. During these times, we mainly focus on nations of the world and needs other than our own.

D. PERSONAL DEVOTIONS

Time is set aside each day for you to be alone with God. It's the most important time of the day for personal growth.

E. REQUIRED READING

This requirement is set up to complement classroom curriculum. The list changes from school to school.

F. WORK DUTIES

Each student works about two hours a day on the base. Some adjustments are made for families. There are also work duties on weekends. The purposes for work duties are twofold:

1. They significantly lower the cost of the school by providing needed help in areas such as maintenance, cooking, cleaning, and office work.
2. The Bible encourages us to do everything as unto the Lord. Working hard and with joy is a class in itself; therefore, it is a vital part of the training.

G. DAILY SCHEDULE

An average day during the lecture phase might look like the schedule below (your DTS may vary). Evenings are usually free to study and relax, but there will be some school meetings and functions after dinner as well as on several weekends.

Morning

- 7:00 Breakfast
- 7:30 Worship
- 8:00 Intercession/Small Groups
- 9:00 Personal Devotions
- 10:30 Teaching

Afternoon

- 12:15 Lunch
- 1:15 Work Duty
- 3:30 Teaching
- 5:30 Dinner

Evening

II. OUTREACH PHASE

The eight-week DTS outreach is designed to expose you to various needs of some of the people groups in this world, help you see as our Father does, and minister the love of Jesus to them. Students and staff usually pray together to determine the outreach locations for the school.

By applying the principles and perspectives learned during the lecture phase, you see how God can use you to show His love to others and extend His kingdom on earth!

You will be able to deliver the message of His life and hope that brings healing to the nations. You will share Christ's love in various ways such as child evangelism, dramas, music, personal testimonies, church ministry, and practical help for the poor and needy.

Whenever possible, teams work alongside an existing fellowship, usually referring new believers to that church. After the outreach, the team returns to our base for a time of sharing what God has done.

TUITION PAYMENT POLICY

All students are expected to pay the full tuition amount at DTS registration (during the first week of the school).

AFTER DTS TRAINING

After your training, there are a variety of opportunities to serve as a full-time staff member with Youth With A Mission. Whether here in Keyser, or at one of over 1,200 YWAM centers around the world, we can help prepare you for what God is calling you to do. (At YWAM West Virginia it is a requirement to have completed the DTS to join staff)



Faith, Finances, and Fundraising

Youth With A Mission West Virginia @ Keyser

God sometimes uses finances as a way to stretch our faith when we consider getting involved in His work. Experience has shown us that many people coming to a YWAM program lack good understanding of faith and finances. It is important to put our trust in God and to believe that He will provide for all of our daily needs, including tuition fees and outreach costs.

YWAM'S FINANCIAL POLICY

Every leader, staff member, and volunteer in YWAM is dependent upon God for his or her own needs. No one in YWAM receives a salary. While we look to the Lord for provision, we realize that He usually does this through His people. It comes in different ways for each individual. Some receive regular support from their home church while others see their needs met through gifts from interested friends and family. Many times, YWAMers will give to one another as the Lord leads. In any case, each YWAMer have the right to personal ownership and responsibility of the money with which one has been entrusted. YWAM embraces this policy because of following reasons:

1. IT IS BIBLICAL

There are a number of examples in Scripture that show where God has others provide for those in full-time ministry "for His name's sake." Below are some biblical answers to fundraising questions.

- Is it biblical to be supported by others? (Num. 8:14, 18:21-24, Luke 8:1-3, Phil. 4:15-18)
- Is it biblical to make financial appeals for a missions project? (1 Cor. 16:5,6, 1 Kings 17:1-16)
- Is it biblical to ask people you don't know very well? (3 John 5-8)
- What about asking those who aren't as well off as you are? (2 Cor. 9:6,7, Luke 21:1-4)
- Does the Bible give guidelines for becoming wealthy? (Prov. 10:4, 11:24-26, 28:27, 21:5)

2. IT PROMOTES HEALTHY AND STRONGER RELATIONSHIPS

As we give to each other and pray for each other, we naturally gain a deeper friendship with that individual or group.

3. WE LEARN TO TRUST GOD MORE

Leaning on God helps us to be more dependent upon Him and interdependent of others.

WHAT IS FAITH?

The biblical definition of faith from Hebrews 11:1 is "being sure of what we hope for and certain of what we do not see." Faith is when we hear God's word (Romans 10:17) and believe that what God said will come to pass. We must also understand what faith is not. Faith is not presumption. Presumption in financial areas is dangerous because it presumes God will provide money in an area He has not necessarily promised. Many people come up short on finances because they mistake presumption for faith. If you're attempting to get to the right place but at the wrong time, this may be the reason for hold up on financial provision. If the timing is right, then God will provide the necessary funds and orchestrate financial releases.

Faith is not wishful thinking. Faith is always based on God's character and His word that He has given us. It is believing and trusting that whatever God has promised will happen.

STEWARDSHIP PRINCIPLES

1. LIVE SACRIFICIALLY

Consider saving the money you usually spend on eating out, movies, coffee, and other non-essentials. If you do the possible, God will do the impossible.

2. BE FAITHFUL IN TITHING

The Bible instructs us to give God 10% of everything He provides for us. If you have a job or an allowance, are you giving God the small amount that He asks for? If not, that may be why you aren't receiving the bigger amounts you need for your trip. Jesus said, "Give and it will be given to you." Are you giving to other missionaries and people like you who have made missions a priority? It would be insincere for you to want money for your missions trip and not to support others.

PRACTICAL SUGGESTIONS

1. PRAY (Phil. 4:6, James 2:26).

Spend time with God. Spend whatever amount of time it takes to discern His leading. The Bible instructs us that "you have not because you ask not" (James 4:2). Remember also that God's greatest priority is not just to supply us with the finances we need but to draw us closer to Himself. When God leads us in a certain direction and we do not have the funds to go further, we need to spend more time in prayer and seek additional counsel from our pastor and other mature Christians before proceeding.

2. WORK (2 Thes. 3:10; 1 Thes. 2:9; and 1 Cor. 4:12).

When we are faithful in the little He has given us He releases more (Luke 16:10-12). We must also be wise and disciplined by setting aside funds to pay for our upcoming fees. God may not provide if we squander what He brings our way, no matter how small.

3. SELL

Pray about possibly selling a personal possession. Selling a car, for example, can be a good means of providing funds.

4. SHARE YOUR VISION WITH PASSION

People need to see why you want to serve Jesus in this way. Get personal and meet with people face-to-face whenever possible. Don't use newsletters to raise support. It is the least personal and least effective way. Tell your friends, family, youth group, teacher, coach, employer—anyone you know who might be interested in your exciting plans. A face-to-face visit includes the following points:

a. Tell them why you need support

Show them YWAM materials and, if you can, your specific projects. God wants to tie the hearts of others into missions through their giving. Matthew 6:21 says, "Where your treasure is your heart will be also." God has not called us to be independent ministers but part of a team accountable to one another and confirmed in our calling by those who are led to support us.

b. Inform and give an overview of YWAM

Know the basics YWAM is an international, interdenominational mission founded in 1960 by Loren Cunningham. He had a vision of waves of young people splashing onto every continent in the world with the gospel. YWAM works through three main ways; Evangelism, sharing the gospel of Jesus Christ in every nation; Training, discipling people of all ages to know God and make Him known; and Mercy Ministry, demonstrating God's love to the needy in practical ways. YWAM has 17,000 full-time staff serving in more than 1,100 different locations in over 170 nations. YWAM trains 30,000 short-term volunteers annually in programs all over the world. Have something on paper, such as YWAM information or a personal prayer card to leave with them.

c. Illustrate and inspire

Don't just tell people you are going into missions. Explain how God called you to mission work. Share your testimony. Let them know what God has done in your life. Include any time when God used you in a specific way. Share what you believe He is calling you to do or be

Ask them to prayerfully consider sponsoring you for your mission work. If God leads them to give, they will depend on Him to do it. They will be blessed for their faith and sacrifice. Tell them how much money you need and your need for sponsorship. Here is a suggestion: If you need to raise \$750, you could ask 10 people for \$75, 15 people for \$50, or 20 people for \$37.50. Look them in the eye and ask them to go to God about your need. Get their prayer commitment on the spot! Ask them to pray about supporting you and make them aware of your deadline for raising finances.

e. Follow up

Be sure to call or visit those persons that you've asked to pray about giving financially to find out how the Lord has shown them to be involved. Follow up is essential in fundraising. It brings closure for you and for them. Without closure, the relationship could be strained. Call or visit them in a week or two and ask them how God is leading them to be involved. Remind them of their commitment, if they made one. Offer to pray for any personal needs they may have. Make sure to get their names and addresses so you can send a thank you note the next day.

HOW TO BLESS YOUR SPONSORS

- Send a thank you note immediately for any gifts you receive. Be sincere and straightforward with your appreciation.
- You should not only expect your sponsors to pray for you, but you should ask God to bless them. If you know they have specific needs, pray for those needs.
- Get your sponsors' names and addresses and send them a post card while you are gone. Bring back a small gift for each of your sponsors.

FOR FURTHER STUDY

Funding Your Ministry

Whether You Are Gifted Or Not

by Scott Morton / Dawson Media.

Friend Raising

Building A Missionary Support Team That Lasts

by Betty Barnett / YWAM Publishing.

Stepping Out

A Guide To Short Term Missions

YWAM Publishing



Information Regarding Children of YWAM West Virginia Training School Students

YWAM welcomes families and single parents! Ever since our beginning as a missionary organization in 1960, we have seen increasing numbers of families join our ranks. This is exciting because we know God calls the whole family into missions. We now have hundreds of families around the world working in YWAM as full-time staff. Their children are being educated and raised while in the ministry and, along with their parents, are learning how to reach a lost world for Jesus Christ.

For parents considering coming to our training schools in Keyser, West Virginia the following information should give you a good understanding of the things you need to know regarding the care of your children while you are attending the school.

COSTS (ROOM AND BOARD)

0 - 1 year
\$ 300 2 - 5 years
\$ 500 6 - 12 years
\$ 600 13 - 16 years

NURSERY AND PRE-SCHOOL

While parents are in class, infants can be in class as long as they are not disturbing class. Childcare for older students will be worked out with the school leader.

WORK DUTIES

There will be a two-hour work duty in the afternoon when the students help around the base with many of the tasks such as cooking, cleaning, grounds/building maintenance work, office work, etc. Mothers with small children are usually given tasks in the dorms where they live so their children may play nearby or take naps during that time.

ADDITIONAL INFORMATION

You are welcome to bring your children's bikes, tricycles, and favorite toys. However, please be aware there is limited space. Children are with their parents during all three meal times. Cribs are not provided for infants, and we do not have highchairs for use in the cafeteria.

SCHOOL AGE CHILDREN (K-12)

Children may attend Mineral County Public Schools

You may register your children in the Mineral County Public Schools. You should bring with you records of your children's past grades. Bus transportation is provided by the Mineral County School District. Please contact the school before you arrive.

Mineral County School District
Administration Office
Phone (304) 788-4200
Fax (304) 788-4204



Guidelines to Completing School Application

Thank you for applying to one of YWAM West Virginia @ Keyser training programs. In order for us to process your application, we must receive each of the following items:

1. School Application Form.

Please make sure Sections A–G are completed. If you do not have a passport, please apply for one and indicate that you have done so in the appropriate section.

2. One Recent Photo

(wallet size).

3. Confidential Health Form.

A physician must sign this form. This form includes **Consent for Treatment/ Liability Release** (each applicant must sign this)

4. Two Reference Forms.

Please fill out the top portion of each reference form. Give one to your pastor/minister or spiritual leader, one to a teacher or employer, and one to a mature Christian friend. Provide each person with a stamped envelope addressed to:

YWAM West Virginia
P.O. Box 1188
Keyser, WV 26726

5. Registration Fee.

A non-refundable registration fee of \$40 for singles or \$50 for married couples must be sent with the application. There will be a late fee of \$10 for applicants registering less than 15 days prior to the beginning date of the school. For non-U.S. residents, please see note below.

Note For Non-U.S. Residents

All payments of registration and tuition fees should be made in U.S. Dollars. You may go to your bank and request an International Money Order in U.S. Dollars—the correct document will have nine (9) magnetic numbers at the bottom. If another form of payment is received we will have to send the check for processing which can take up to six weeks. In addition, a service charge will be deducted. If you are unable to obtain an International Money Order in U.S. Dollars in your country we will process your funds, but you must make up the balance of funds needed.

DONATIONS TO YOUTH WITH A MISSION

Because YWAM is registered with the Internal Revenue Service as a 501(c) 3 non-profit organization, donations made for missions outreaches are tax-deductible and nonrefundable. In order for supporters to receive a tax-deduction, checks must be made payable to YWAM and NOT to a specific participant. The participant's name MUST NOT appear anywhere on the check.

CANCELLATION POLICY

IRS regulations **do not allow** YWAM to refund contributions received for outreaches. If an applicant cannot go on his/her planned outreach, YWAM will subtract the cost of any previously purchased airline tickets and administrative fees and apply the balance to another YWAM outreach (for the same applicant) for up to one year. Any funds received in excess of the amount needed for an outreach will be used for the ministry of Youth With A Mission West Virginia @ Keyser



Please return form to
YWAM West Virginia - P.O. Box 1188 - Keyser, WV 26726
304-788-8011 - info@ywamwestvirginia.com - www.ywamwv.com

Please staple
wallet-size
photo here.

APPLICATION

I would like to sign up for: Circle one

DTS----SST----SOE----SOW----SOS----MA----MTO----CY---- Lock in----Teen Camp----STAFF----Volunteer

Starting date _____

SECTION A: Personal Information

(Please print or type) Please be sure to include the non-refundable registration fee.

Name _____ Phone () _____

Present Address _____

Email _____ Sex _____ Date of Birth _____

SSN # _____ Driver's License # _____ State _____ Type/Class _____

Please attach photocopy of driver's license

Marital Status: Single Engaged Married Separated Divorced

List full name, age, schooling grade level and sex of children accompanying you _____

Emergency Contact _____
Name Relationship Phone #

Address _____
Street City State/Province Zip Country

How long have you been a "born again" Christian? _____

Do you have previous YWAM experience? If so, when and where? _____

SECTION B: Church Information

Home Church _____ How long have you attended? _____

Church Address _____ Church Denomination _____

Pastor's Name _____ Church Phone () _____

SECTION C: Passport/Visa Information

Country of Citizenship _____

Name as it appears on passport _____

City and country where passport was issued _____ Passport # _____

Passport Expiry Date _____ Visa Type _____ Date Visa Issued _____

non-U.S. residents only

City and country where visa was issued _____ Visa Expiration Date _____

SECTION D: Confidential Health Form See attached.

SECTION E: Education/Employment/Skills

Highest level of education completed _____

Post-secondary school(s) attended _____

What languages do you speak? (most fluent to least) 1. _____ 2. _____

3. _____ 4. _____ 5. _____

Military service? Yes No (specify) _____

Present Employer _____ Occupation _____

Other Occupational Skills _____ Years Experience _____

Musical Abilities/Other Talents _____

Are you presently ordained or licensed? _ Yes _ No (specify) _____

What are your plans after you complete this training?

- Full-time missions YWAM West Virginia staff Back to job Further education Work with home church
 Construction Teaching Refugee work Mercy Ships Uncertain

SECTION F: Financial Information

Do you have the total school fees? Yes No If no, what percentage do you have? _____

From what source(s) will you receive the remainder? _____

Do you have any outstanding debts? If so, explain _____

Non-U.S. Residents

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SECTION G: Supplemental Questions

Please prayerfully and concisely answer the following questions on a separate piece of paper. Please print or type.

- Describe your current relationship with the Lord Jesus. How and when did He become real to you?
- Describe your family relationship (broken home, family church and denominational background, etc.)
If married tell about your relationship with your spouse.
- List your education and work experiences: Time and positions held.
- What is your purpose in applying to this YWAM program?
- Please tell us about your gifts, strengths and talents. Also, anything else that may help us better support you through this program.
- Have you ever been involved in a felonious crime, drug or alcohol abuse, occultic activities, petty theft, homosexual practices, or have you ever suffered from an eating disorder, cutting or self mutilation, depression, or suicidal thoughts? Explain
- Please list any special circumstances or situations we should know about.

I certify that all information in this application is complete and accurate. If accepted by Youth With A Mission, I will abide by the spirit, rules, and schedule of the program. I understand that any and all Confidential Evaluations in my file are YWAM property, and I relinquish the right to view them or obtain information from them in any way. In accordance with biblical principles, I agree to resolve any and all disputes with Youth With A Mission, its directors or staff by means of reconciliation or mediation and waive any right to pursue action by way of litigation. I confirm that I understand that payment of required tuition fees must be made upon or before arrival. I also confirm that I am fully aware of my financial obligation, both to the Lord and to the students and staff at YWAM. I therefore commit myself to paying all personal expenses incurred during my involvement with Youth With A Mission.

Signature _____ Date _____

CONFIDENTIAL HEALTH FORM

Name _____ Program applying for _____
 In an emergency, contact _____ Phone () _____
 Medical Insurance Co. _____
 Insurance # _____ Medical Insurance Co. Phone () _____

PERSONAL HISTORY Please answer all questions. Explain any "Yes" answers in the space below.

HAVE YOU EVER HAD, OR DO YOU HAVE ANY OF THE FOLLOWING?

	Yes	No		Yes	No		Yes	No
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	Paralysis	<input type="checkbox"/>	<input type="checkbox"/>	Learning disability	<input type="checkbox"/>	<input type="checkbox"/>
Penicillin	<input type="checkbox"/>	<input type="checkbox"/>	Sleep Disorder	<input type="checkbox"/>	<input type="checkbox"/>	Autism (any form)	<input type="checkbox"/>	<input type="checkbox"/>
Sulfonamides	<input type="checkbox"/>	<input type="checkbox"/>	Cutting	<input type="checkbox"/>	<input type="checkbox"/>	ADD or ADHD	<input type="checkbox"/>	<input type="checkbox"/>
Serum	<input type="checkbox"/>	<input type="checkbox"/>	Surgery	<input type="checkbox"/>	<input type="checkbox"/>	Mental/nervous disorders	<input type="checkbox"/>	<input type="checkbox"/>
Food (specify below)	<input type="checkbox"/>	<input type="checkbox"/>	Appendectomy	<input type="checkbox"/>	<input type="checkbox"/>	Hearing voices	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>	Hernia repair	<input type="checkbox"/>	<input type="checkbox"/>	Bipolar disorder	<input type="checkbox"/>	<input type="checkbox"/>
Skin conditions	<input type="checkbox"/>	<input type="checkbox"/>	Tonsillectomy	<input type="checkbox"/>	<input type="checkbox"/>	Schizophrenia	<input type="checkbox"/>	<input type="checkbox"/>
Eye trouble	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>	Anxiety disorder	<input type="checkbox"/>	<input type="checkbox"/>
Ear trouble	<input type="checkbox"/>	<input type="checkbox"/>	Stomach/duodenal ulcer	<input type="checkbox"/>	<input type="checkbox"/>	OCD	<input type="checkbox"/>	<input type="checkbox"/>
Head injury	<input type="checkbox"/>	<input type="checkbox"/>	Gall bladder problems	<input type="checkbox"/>	<input type="checkbox"/>	PTSD	<input type="checkbox"/>	<input type="checkbox"/>
Recurrent headaches	<input type="checkbox"/>	<input type="checkbox"/>	Jaundice	<input type="checkbox"/>	<input type="checkbox"/>	Depression	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	Intestinal troubles	<input type="checkbox"/>	<input type="checkbox"/>	Panic Attacks	<input type="checkbox"/>	<input type="checkbox"/>
Fainting spells	<input type="checkbox"/>	<input type="checkbox"/>	Recurrent diarrhea	<input type="checkbox"/>	<input type="checkbox"/>	Suicidal thoughts	<input type="checkbox"/>	<input type="checkbox"/>
Shortness of breath	<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Phobias	<input type="checkbox"/>	<input type="checkbox"/>
Asthma, hay fever	<input type="checkbox"/>	<input type="checkbox"/>	Kidney disease	<input type="checkbox"/>	<input type="checkbox"/>	Eating disorders	<input type="checkbox"/>	<input type="checkbox"/>
Heart trouble	<input type="checkbox"/>	<input type="checkbox"/>	Anemia	<input type="checkbox"/>	<input type="checkbox"/>	Addictions	<input type="checkbox"/>	<input type="checkbox"/>
High/low blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	Tumor/cancer	<input type="checkbox"/>	<input type="checkbox"/>	Tobacco	<input type="checkbox"/>	<input type="checkbox"/>
Rheumatism/arthritis	<input type="checkbox"/>	<input type="checkbox"/>	STDs/Venereal disease	<input type="checkbox"/>	<input type="checkbox"/>	E-cigarettes	<input type="checkbox"/>	<input type="checkbox"/>
Back problems	<input type="checkbox"/>	<input type="checkbox"/>	HIV	<input type="checkbox"/>	<input type="checkbox"/>	Alcohol	<input type="checkbox"/>	<input type="checkbox"/>
Dislocation of joints	<input type="checkbox"/>	<input type="checkbox"/>	Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	Drugs (illegal or prescription)	<input type="checkbox"/>	<input type="checkbox"/>
Broken bones	<input type="checkbox"/>	<input type="checkbox"/>	Pregnant (current or previous)	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify below)	<input type="checkbox"/>	<input type="checkbox"/>

Other/Explain (specify history, time frame, any treatment/prescriptions, and current condition related to each box checked "yes" above. Use a separate piece of paper if needed): _____

Are you current on all of your state-required childhood immunizations and boosters? Yes No (If no, please explain) _____

Are you now under doctor's care for any condition? Yes No (specify) _____

Are you taking any medication at this time? Yes No (specify by listing drug name, dosage/frequency, and what it's for): _____

Do you have any physical handicaps or health conditions which require special attention? Yes No (specify) _____

Do you have a history of receiving counseling or psychiatric treatment? Yes No (please specify what it was for and how long) _____

Have you ever been in trouble with the law (shop lifting, sexual assault, drug charges, DUI, etc.)? Yes No (specify) _____

TO THE PHYSICIAN Name of Applicant _____

The above-named person has applied for service with Youth With A Mission. This program requires good health and endurance. Please review the "Personal History" information on the opposite side, fill out the portion below, and make any additional comments.

Blood Pressure _____ Pulse _____

Are there any abnormalities of the following systems?

	Yes	No	Please describe
Ears, nose, throat	<input type="checkbox"/>	<input type="checkbox"/>	_____
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	_____
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cardiovascular	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	_____
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	_____

Would he/she be able to walk 3-4 miles per day? Yes No

Comments _____

PHYSICIAN RECOMMENDATION Acceptable Not acceptable Should remain in areas with adequate medical care

Acceptable with limitations (specify) _____

Physician's Signature _____ Date _____

Physician's Name (printed) _____

Full Address _____

CONSENT FOR TREATMENT

I/we hereby agree to the performance of such treatment, anesthetics, and operations as in the opinion of the attending physician is deemed necessary on the above-named person.

Applicant's Signature _____

Parent/Guardian Signature (for applicants under 18) _____

Date _____

Date _____ Relationship to applicant _____

LIABILITY RELEASE

I/we hereby release YOUTH WITH A MISSION WEST VIRGINIA INC., its agents, 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, INC. I/we agree to resolve any and all disputes with YOUTH WITH A MISSION, YWAM Directors, or staff by means of reconciliation or mediation and waive any right to pursue action by way of litigation.

Applicant's Signature _____

Parent/Guardian Signature (for applicants under 18) _____

Date _____

Date _____ Relationship to applicant _____

LEGAL CONSENT FOR MINORS

I hereby give my consent for _____ to travel outside of the United States of America with YOUTH WITH A MISSION.
(Name of minor)

Signature of parent/guardian _____

Date _____

CONFIDENTIAL REFERENCE

TO THE APPLICANT

This evaluation is confidential and will not be shown to you. **Please do not use a family member as a reference.** Give this form to the person filing the reference along with a stamped envelope addressed to: **YWAM West Virginia - P.O. Box 1188 - Keyser, WV 26726**

Name of Applicant _____ Phone () _____
 Address _____ City _____ State _____ Zip _____ Country _____
 Program applying for _____ Starting date _____

TO THE PERSON FILLING OUT THIS FORM

The above applicant has applied for participation in a program sponsored by Youth With A Mission in West Virginia @ Keyser. YWAM, founded in 1960, is an international, interdenominational Christian missionary organization. Serious consideration will be given to your comments, so we greatly appreciate your careful and thoughtful completion of this form. All evaluations are kept in strict confidence and will not be shown to the applicant. Your early response (within 7 days) is most appreciated. Thank you for your assistance.

What is your relationship to the applicant? Employer Teacher Pastor Friend Past YWAM leader
 Other _____
 How well do you know the applicant? Very well Well Casually
 How long have you known the applicant? _____ years _____ months

Please check the following and comment as necessary:

	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	INFERIOR
Ability to receive correction					
Self-confidence					
Ability to make decisions					
Social poise					
Concern for others					
Ability to follow					
Leadership					
Willingness to serve					
Emotional stability					
Communication skills					
Health					
Personal hygiene					

Comments: _____

Mental ability	<input type="checkbox"/> Quick to comprehend	<input type="checkbox"/> Average	<input type="checkbox"/> Slow
Industry	<input type="checkbox"/> Hard worker	<input type="checkbox"/> Average	<input type="checkbox"/> Lacks persistence
Reliability	<input type="checkbox"/> Meets obligations	<input type="checkbox"/> Average	<input type="checkbox"/> Neglects obligations
Teamwork	<input type="checkbox"/> Works well with others	<input type="checkbox"/> Average	<input type="checkbox"/> Often causes friction
Flexibility	<input type="checkbox"/> Open to change	<input type="checkbox"/> Average	<input type="checkbox"/> Unyielding
Christian character	<input type="checkbox"/> Well-balanced	<input type="checkbox"/> Average	<input type="checkbox"/> Unstable
Disposition	<input type="checkbox"/> Cheerful	<input type="checkbox"/> Average	<input type="checkbox"/> Passive
Punctuality	<input type="checkbox"/> Punctual	<input type="checkbox"/> Average	<input type="checkbox"/> Often late
Financial responsibility	<input type="checkbox"/> Honors obligations	<input type="checkbox"/> Average	<input type="checkbox"/> Neglectful

continued on next page...

1. Which 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, is he/she Dedicated Average Casual

Comments _____

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

4. What do you think/believe 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 (e.g. medical, psychological, drug or alcohol abuse, criminal record, eating disorders, homosexual, occultic practices, 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 be accepted by this YWAM program?

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

Signature _____ Date _____

Name (please print) _____ Phone () _____

Address _____ State _____ Zip _____ Country _____



CONFIDENTIAL REFERENCE

TO THE APPLICANT

This evaluation is confidential and will not be shown to you. **Please do not use a family member as a reference.** Give this form to the person filing the reference along with a stamped envelope addressed to: **YWAM West Virginia - P.O. Box 1188 - Keyser, WV 26726**

Name of Applicant _____ Phone () _____
 Address _____ City _____ State _____ Zip _____ Country _____
 Program applying for _____ Starting date _____

TO THE PERSON FILLING OUT THIS FORM

The above applicant has applied for participation in a program sponsored by Youth With A Mission in West Virginia @ Keyser. YWAM, founded in 1960, is an international, interdenominational Christian missionary organization. Serious consideration will be given to your comments, so we greatly appreciate your careful and thoughtful completion of this form. All evaluations are kept in strict confidence and will not be shown to the applicant. Your early response (within 7 days) is most appreciated. Thank you for your assistance.

What is your relationship to the applicant? Employer Teacher Pastor Friend Past YWAM leader
 Other _____
 How well do you know the applicant? Very well Well Casually
 How long have you known the applicant? _____ years _____ months

Please check the following and comment as necessary:

	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	INFERIOR
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Self-confidence					
Ability to make decisions					
Social poise					
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Leadership					
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Communication skills					
Health					
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Mental ability Quick to comprehend Average Slow
Industry Hard worker Average Lacks persistence
Reliability Meets obligations Average Neglects obligations
Teamwork Works well with others Average Often causes friction
Flexibility Open to change Average Unyielding
Christian character Well-balanced Average Unstable
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Signature _____ Date _____

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Address _____ State _____ Zip _____ Country _____

