

KING'S CASTLE USA of King's Castle Int'l – STUDENT APPLICATION

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Application For Children/Youth Workers

CONFIDENTIAL

1-3 Year Intern/Missionary Assoc Summer Weekend Warriors (1-4 Saturday each Month)

Summer Internship (3-12 Weeks) Dates of Availability: ____/____/____ to ____/____/____

Full Name _____ **Date of Birth:** ____/____/____

This application is to be completed by all applicants for any position (volunteers or interns) involving the supervision or custody of minors. It is being used to help the ministry provide a safe and secure environment for those children and youth who participate in our programs. This information is confidential and to be used only by authorized staff, and kept in a locked file. All applicants will be considered without prejudice of age, gender, nationality or disabilities. PLEASE SUBMIT A CURRENT WALLET-SIZED PHOTOGRAPH with application.

PERSONAL:

Marital Status: Single Married Separated Divorced Widowed Engaged

If student, give name of college: _____

College Address: _____ City _____ State ____ Zip _____

Telephone: Dorm (_____) _____ Work (_____) _____

Permanent Address _____

City _____ State _____ Zip _____

Email: _____ Birth date ____/____/____ Gender: M F

Phone: Home (_____) _____ Cell (_____) _____ Social Security #: _____

US Citizen? Yes No If no, country of citizenship? _____

Permanent Resident # _____ Current Visa Type _____

FAMILY:

Parents' Names _____

Parents' Address _____ City _____ State ____ Zip _____

Parents' Phone: Home (_____) _____ Work (_____) _____

EMERGENCY CONTACTS:

Name _____ Relationship _____

Address _____ City _____ State ____ Zip _____

Telephone: Home (_____) _____ Work (_____) _____

Name _____ Relationship _____

Address _____ City _____ State ____ Zip _____

Telephone: Home (_____) _____ Work (_____) _____

FINANCES:

Can you cover your expenses from personal funds? ___ Yes ___ No If not, how do you plan to cover your personal expenses? _____

Do you plan to apply with US Missions as a missionary associate to raise support through the General Council of the Assemblies of God so your family/friends can receive tax-deductible receipts for their donations for your monthly expenses? ___ Yes ___ No If yes, please go to www.ag.org and review the application process under US Missions.

List any financial obligations you would be responsible for while serving with this ministry team. Include school bills, family support, cell phone, child support, etc. _____

EDUCATION:

Year of high school graduation: _____ College semesters completed (as of 6/2020): 1st 2nd 3rd 4th

College(s) attended: _____

Major(s): _____ Degree(s) Completed: _____

In addition to English, what languages do you speak? _____

Proficiency of second language: _____

Do you have a driver's license?

Yes No

Driver's license #: _____

State issuing license: _____

Expiration Date: ____ / ____ / ____

Do you have any specialized license or endorsement? (Class B, C, etc.) _____

Have you ever been convicted of a Traffic Criminal or Traffic Offense? Yes No

If yes, describe all convictions in past 5 years:

What ministry areas do you prefer to use your skills?

Youth ministry Children's ministry Puppetry

Drama/Human Videos Dance (style): _____

Athletics/Sports: _____

Music (list instrument/vocal): _____

Are you willing to commit to daily orientation, Bible training, supervision requiring 40+ hours/week (group devotions, Bible study, hands-on ministry, household chores, community service, evangelistic events)? Yes No If "no," explain:

PERSONAL VALUES (CODE OF CONDUCT):

Do you currently or have you previously used tobacco, alcohol or illegal drugs? Yes No If "yes," explain.

Have you had periods of depression, discouragement, thoughts of suicide, chemical imbalance, bi-polar disorder or other life issues such as cutting yourself or other self-defacing acts: Yes No If "yes," please explain.

Do you agree to abstain from any addictive substances, any sexual immorality, gambling, unscriptural conduct and inappropriate behavior while serving with King's Castle USA? Yes No If "no," please explain.

Although King's Castle USA does not require all interns and volunteers to fully agree with the Tenets of Faith of the Assemblies of God (please review at: http://ag.org/top/Beliefs/Statement_of_Fundamental_Truths/sft.pdf, it is important to clearly understanding any difference there may be in the specific areas of your doctrinal beliefs. Do you fully agree with the Statement of Fundamental Truths of the Assemblies of God? Yes No If "no," please specifically explain all areas of differences on a separate attachment.

CHURCH ACTIVITY:

1) Are you a Christian? Yes No When were you saved? _____

2) Are you baptized in the Holy Spirit with the evidence of speaking in tongues (Acts 2:4) Yes No

3) *List on separate sheet:* goals, talents, spiritual calling and any factors you want to develop/use during internship.

PERSONAL REFERENCES:

Please submit a list of references including: 2 credentialed pastors, 2 friends, and 1 employer with their names, address, phone and email address (stating their relationship to you).

I agree to my references being contacted. Yes No If "no," explain why? _____

APPLICANT'S STATEMENT:

I certify that the information contained in this application is correct to the best of my knowledge. I authorize Rev. JoAnn Riley to investigate any matters contained in this application. I hereby authorize any reference or church listed in this application to release any information (including opinions) they may have regarding my character and fitness for children/youth work, and release all such references from liability for any damage that may result from furnishing such evaluations to you. I waive any right that I may have to inspect references provided on my behalf.

Applicant's Signature _____ Today's Date _____

Pastor's Signature _____ Today's Date _____

Submit to: King's Castle USA, PO Box 2225, Victorville, CA 92393 • (562)841-5298 • revjriley@kingscastleusa.org