

1. Please describe your personal salvation testimony in depth.
2. What are your reasons for attending the CRC Koinonia Bible School? What are you hoping to receive out of Koinonia?
3. What are some areas that you are working on and hoping to grow in, in your walk with the Lord?

Questions #4 - #10 In 10-50 words per question:

4. How would you describe your personal devotions and time with the Lord?
5. What is one thing that God has been teaching you lately?
6. How would you describe your personality?
7. How would you describe your relationships with others?
8. How do you approach conflict and friendship issues?
9. How well do you receive correction and instruction?
10. How long have you been a Christian?

Questions #11 - #15 For the following five questions, please circle your answer. **If the answer you circled is in bold, please explain it on your separate sheet(s).**

11. If you attend CRC-DS we are asking you to lay aside trying to start any new special, guy girl relationships while you are here. We want this time to be as focused on the Lord for you as possible and this will only be a distraction. Are you willing to lay this aside and be held accountable in this area while you are here? Yes **No**
12. Do you have any personal history of sexual immorality? **Yes** No
13. Are you currently seeking to obey and conform to Biblical standards? Yes **No**
14. Are you currently struggling with any habitual sin? **Yes** No
15. Have you even been involved in any cult or occult activities? **Yes** No

Ministry:

In 100-300 words:

16. Please tell how you would share the plan of salvation to an unbeliever.

In 10-100 words:

17. Please share what you feel are your greatest strengths and weaknesses are in ministering to others.
18. Have you been on any mission trips? **If yes, please describe briefly where you went and what you did on each trip.**
19. Have you ever been overseas or in a developing nation? **If yes, please describe.**
20. Have you been involved and/or are you currently involved in any regular ministry? **If yes, please describe briefly what you do.**

An important aspect of the CRC-DS is that each student contributes to the ministry of CRC and the School of Koinonia in practical ways. Please circle the areas in which you have previous experience and underline the areas you are especially interested in serving in.

- | | | |
|---------------------------|-------------------------|--------------|
| Housekeeping | Landscaping/maintenance | Food Service |
| Technology | Working with children | Coffee Shop |
| Videographer/photographer | | Other |

21. Please give a brief description of how you gained your experience in the areas circled.
(from the most experience to the least)
22. What are some of your talents, hobbies and interests? Please list and describe.

Child Safety:

Please circle your answer. If you circle "Yes" on any of these questions, please explain in depth.

23. Have you ever been convicted of a crime? Yes No
24. Have you ever engaged in child abuse of any kind, whether physical, verbal or sexual in nature? Yes No
25. Are you aware of any traits or tendencies that could pose a threat to children, youth or others? Yes No
26. Is there any reason that you know of that you should not work with children, youth or others? Yes No
27. Have you ever intentionally viewed pornography in any form? Yes No

Education Background:

28. High School Diploma or GED Name of School(s) attended _____
Year graduated: _____

29. Please list other schools attended (name of school, subject or course of study, time attended, degree) if any, in addition to High School. _____

Statement and Request for Criminal Records Check:

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to release any information they may have regarding my character and fitness to work with children, youth or adult persons, and I release all such references from liability for any damage that may result from furnishing such evaluations.

I agree with, and will be responsible for familiarizing myself with, all the rules/policy of CRC and will abide by them. I understand that if my character and morals become inappropriate and/or criminal, Christian Renewal Center shall be entitled to terminate my attendance, without expressed cause or prior notice.

I consent to CRC conducting a criminal records check, as deemed necessary. Yes No

Applicant's signature: _____ Date: _____

Applicant's name (please print): _____

Social Security Number: _____

Print all other names that you have used (including maiden name): _____

Please list all states and counties you have resided in: _____

References:

Please provide three references that are familiar with your abilities and character. Please provide a reference from one ministry leader, one work and one personal.

Name	Relationship	Phone	Email
A. _____	_____	_____	_____
B. _____	_____	_____	_____
C. _____	_____	_____	_____

Employment or Volunteer Experience:

30. Please list your employers from the past five years beginning with the most recent. (Use additional paper if needed). If you have not held paid positions, list volunteer positions you have held.

Employer 1: _____
Job Title and Duties: _____
Starting and Ending Pay: _____
Supervisor and Phone Number: _____
Reason for leaving: _____
May we contact them? Yes No
If no please explain why: _____

Employer 2: _____
Job Title and Duties: _____
Starting and Ending Pay: _____
Supervisor and Phone Number: _____
Reason for leaving: _____
May we contact them? Yes No
If no please explain why: _____

Employer 3: _____
Job Title and Duties: _____
Starting and Ending Pay: _____
Supervisor and Phone Number: _____

I hereby grant permission for (myself/my child under age 18) to participate in the activities of CRC's Koinonia School. I understand that (I/my child) participates in these activities at (my/their) own risk and that the leadership of Koinonia and its adult supervisors are not liable for any injury sustained during these activities.

I also recognize that CRC Koinonia may take photographs and video images of events that include (me/my child.) This material may be used in various printed or online publications and I hereby grant permission for such use.

I grant the following medical permissions regarding any accident, injury, sickness, etc. that requires (me/my child) be admitted to any hospital or medical facility for diagnosis and treatment. If the listed emergency contact cannot be reached after a reasonable effort, I authorize the leadership of Koinonia to seek such medical attention and to make decisions on (my/my child's) behalf. I also assume the responsibility for the payment of any such treatment.

Signature of Student

Date

Signature of Parent(s)/Guardian(s) of student under age 18.

Date

Agreements:

If you come to CRC-DS you will not be allowed to smoke, drink or use any illegal or legal drugs. Are you willing to conform to these rules and be held accountable to them? (Circle yes or no)

Yes, I agree to conform to these rules and be held accountable to them.

No, I do not agree to conform to these rules and be held accountable to them.

Signature: _____ Date: _____

I hereby verify that all the information in this application is accurate, true and complete to the best of my knowledge.

Signature: _____ Date: _____

I have read the Koinonia value statement, guidelines and expectations for students and CRC's statement of faith and I agree to uphold them and follow all that is asked and required of me.

Signature: _____ Date: _____

Passport / Visa Information:

You will need a passport for the international outreach. Securing this document can take up to 6 months. If you do not already have a passport, you need to apply for one immediately.

Circle one: I have a Passport I am applying for a Passport

International Students:

If you are going to be attending from out of country please fill out the information below:

Name as listed on passport:

First _____ Middle _____ Last _____

Passport Number: _____ Date of Birth: _____

Place of Birth: City _____ Country _____

Citizenship/nationality: _____

Place of issue: City _____ Country _____

Date of issue: _____ Date of expiry: _____

Visa Type: _____

Visa Valid Dates: _____