

# Application for Creatives Internship

**1 APPLICANT'S NAME** \_\_\_\_\_  
**ANTICIPATED START DATE** \_\_\_\_\_

## TO THE APPLICANT

Please answer all the questions on this application form.

- It will help us if you type your answers or print carefully in black/blue ink
- Husbands and wives must complete separate application forms
- If you need more space to answer a question, please use a separate piece of paper

Please return this form, a photo, registration fee and a short portfolio of your artwork to:

Email: [trainingywamradiant@gmail.com](mailto:trainingywamradiant@gmail.com)

(please print, fill out, sign, scan, then email it back to us)

OR

Post: YWAM London Radiant – Taboo Arts Team

58a St Pancras Way

London NW1 0RB

# 1.PERSONAL DETAILS

Surname \_\_\_\_\_ Title \_\_\_\_\_ First Names \_\_\_\_\_

Present Address \_\_\_\_\_

\_\_\_\_\_

Post/Zip code \_\_\_\_\_ Country \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Permanent address (if different from your present address) \_\_\_\_\_

\_\_\_\_\_

Post/Zip code \_\_\_\_\_ Country \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

Date of birth \_\_\_\_ Day \_\_\_\_ /Month \_\_\_\_ /Year

Place of birth \_\_\_\_\_ Country of birth \_\_\_\_\_

Gender (for accommodation purposes) Male Female

Marital Status (for accommodation purposes) \_\_\_\_\_

\*please note we do ask for married couples to attend the school together

Nationality (for visa purposes) \_\_\_\_\_

Passport number \_\_\_\_\_

Passport issue date \_\_\_\_ Day \_\_\_\_ /Month \_\_\_\_ /Year

Passport expiry date \_\_\_\_ Day \_\_\_\_ /Month \_\_\_\_ /Year

Place of Issue \_\_\_\_\_

Full name (as in passport) \_\_\_\_\_

## 2.FAMILY

Will your children be accompanying you? Yes No Not Applicable

Names of children accompanying you: \_\_\_\_\_

Gender\_\_\_\_Date of Birth (dd/mm/yy)\_\_\_\_\_

Do they need a visa to live in the UK? Yes No (If yes, please fill in details)

Full name (as in passport) \_\_\_\_\_

Passport number\_\_\_\_\_ Nationality \_\_\_\_\_

## 3. CHURCH

Which church do you currently attend? \_\_\_\_\_

Denomination \_\_\_\_\_

Church leader's name and address \_\_\_\_\_

\_\_\_\_\_

Post/Zip code \_\_\_\_\_ Country \_\_\_\_\_

Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ -

How long have you been attending this church or other churches?

\_\_\_\_\_

Church name Dates of attendance Location

\_\_\_\_\_

\_\_\_\_\_

Have you mentioned to your Church Leader your intention of serving with us?

Yes No

If NO, please give reason (Please use separate sheet of paper if necessary)

\_\_\_\_\_

\_\_\_\_\_

#### 4. YWAM HISTORY (IF APPLICABLE)

Please list your history with YWAM for the last 10 years, starting with the most current: From \_\_\_\_\_ To \_\_\_\_\_ Course or Position \_\_\_\_\_ Name of Course/Worker Leader \_\_\_\_\_

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*Please use a separate sheet of paper if necessary.*

#### 5. EDUCATION AND QUALIFICATIONS

University/College/Higher or Further Education (post 16 years old) – including dates and qualifications received:

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#### 6. PRESENT OCCUPATION/CAREER DETAILS

Please list all career details other than YWAM for the last 10 years beginning with the most current or send us a copy of CV or Resume.

From \_\_\_\_\_ To \_\_\_\_\_ List Employers Job Description or Main Responsibilities \_\_\_\_\_

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*Please use a separate sheet of paper if necessary*

#### 7. COMPETENCIES

Which languages do you speak, in order of fluency?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

How well do you speak English? Very Well Well Average Poorly

Practical skills and abilities: \_\_\_\_\_

\_\_\_\_\_

Other talents, special interests, hobbies: \_\_\_\_\_

\_\_\_\_\_

**Please note down which genre/s of the arts you will be applying for.**

**Please attach with this form a portfolio of 10 selections of the last**

**pieces/examples of art under the genre/s you will be applying for.**

Visual arts  Tattoo  Music

Social media  Music Production  Dance  Photography

Creative Writing  Magazine Production  Fashion Design

Filmmaking  Church and Community Development

Performance and Production  Hair Styling  Barista track

Culinary Arts  Graphic Design

## **8. CRIMINAL OFFENCES**

Have you ever been charged with, cautioned or convicted in relation to any criminal offence not subject to DBS (Disclosure and Barring Service)

filtering rules; or are you at present the subject of a criminal

investigations/pending prosecution?      Yes No

If yes, please give details including the nature of the offences and the dates.

Please give details of the court(s) where your conviction(s) were heard, the type of offence and sentence(s) received. Could you also give details of the reasons and circumstances that led to the offence(s) \_\_\_\_\_

\_\_\_\_\_

*(please continue on a separate sheet of paper if necessary)*

Have you ever been the subject of a police investigation in any country, which did not lead to a criminal conviction (not subject to DBS filtering rules)? Yes No

*If yes, please give details below, including the date of the investigation, the Police Force involved, details of the investigation and the reason for this, and disposal(s) if known.*

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To your knowledge have you ever had any allegation made against you, which has been reported to, and investigated by, Social Services/Social Work

Department (Children's or Adult Social Care)? Yes No *If yes, please provide details, we will need to discuss this with you.*

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Has there ever been any cause for concern, any disciplinary action ever been taken against you or written warning given to you in any country, by any employer or any charitable or other organization or body working with children or young people in relation to your behaviour with children or young people? Yes No *(If YES, please give details)*

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**YWAM England and Wales, as an agency working with children and young people, is exempt from the UK Rehabilitation of Offenders Act (1974) and therefore applicants must declare all previous convictions. Police record checks can be made by YWAM to verify information.**

## 10 FINANCES

### COSTS

**Internship cost £3100** (plus registration fee)

*This covers accommodation, food and designated ministry materials. You will need to cover your own transport during your time with us. In addition to the above you should allow some money for leisure etc.*

**Registration fee £100** due with application (*Covers the cost of processing your application, non-refundable.*)

**Deposit £200** due when acceptance letter is received (Confirms your acceptance of our offer of a place, non-refundable. Deducted from total fees)

**Fees Due:** the full payment is due on the start date for the school

(Visa, vaccinations, transport and flight costs payment are the responsibility of each trainee.)

If the finances are not fully paid before the outreach, students may be asked to stay behind from outreach or to leave the program. Each case will be assessed and decided individually. If you have any questions or if anything is unclear please contact [trainingywamradiant@gmail.com](mailto:trainingywamradiant@gmail.com)

*Please note that if you leave the school prior to the end, there is a refund policy in place. If you have any questions regarding those, please ask for more details.*

**Please let us know how your fundraising is going...**

£ \_\_\_\_\_ is how much I have towards the fees

£ \_\_\_\_\_ is how much has been pledged

I plan to raise the rest of the money that I need (if applicable) in the following way

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I understand the financial responsibility of the school and will pay the fees in the timing and way stated in this application.

Signed Date \_\_\_\_\_ (dd/mm/yy) \_\_\_\_\_

Printed Name \_\_\_\_\_

## 10. BACKGROUND QUESTIONS

Please answer the following questions on a separate piece of paper (please type or write clearly):

1. Describe your Christian conversion experience and your present relationship with God
2. What are your expectations of your time with us?
3. Do you have any health problems, dietary restrictions or any disabilities that may affect your day-to-day functioning? If yes, please outline how your functioning may be limited.
4. Is there anything else you think we should know about yourself or your family? (e.g. current personal issues, health of yourself and children, children's educational needs, dependent close relatives)
5. What is your purpose for training with us?
6. How do you think you would cope with living closely with others in limited personal space?
7. What gifts and strengths do you think you bring to the ministry?
8. How did God lead you to apply to this location? (Please detail any connections you have with this location)
9. In which areas of your life have you recently seen growth, e.g. spiritual gifts, character etc, and how is this developing?
10. What do you and others recognize your main weaknesses to be?
11. How did you hear about YWAM for the first time?
12. How did you find out about this base?
13. What is the main reason that you chose to apply to this base?

## 11. DECLARATIONS

### I UNDERSTAND THAT:

If I am accepted I will comply with the values and ethos of Youth With A Mission LTD. (These documents can be found in the YWAM London Radiant Policy Handbook)

In accordance with the Data Protection Act (2018), the information provided on my internship application

form will be held securely, confidentially and will not be kept for longer than is necessary to achieve the

stated purpose of recruitment, selection, supplementary personal details and statistics, or that required

by law or our insurance company.

### CONSENT FOR TREATMENT – AN EMERGENCY PROVISION

In the event that I am unable to sign a consent form due to incapacity, I hereby give my consent for any

treatment/medical intervention deemed necessary by the attending health care professionals.



Whilst YWAM will make every effort to contact my next of kin/emergency contacts, there may be situations where this is not possible. I, therefore, give permission for YWAM to act in my best interests. I recognize that in an emergency situation it is standard operating procedure to always act in the interest of preserving life.

**RELEASE OF LIABILITY:**

Though every effort is made to provide a safe environment, Youth With A Mission Limited, their agents, employees and trainee assistants are insured against loss or injury caused by the negligence of  
Youth With A Mission Limited.

In the absence of any negligence or other breach of duty by Youth With A Mission Limited, participation in a Youth with A Mission Limited organised programme, event or outreach is entirely at  
the participant's own risk.

Accordingly participants are required to have adequate medical insurance for all phases of their involvement with Youth With A Mission Limited.

**SAFEGUARDING DECLARATION:**

If needed, I consent to a criminal records check if appointed to the position for which I have applied. I

am aware that details of pending prosecutions, previous convictions, cautions, or bindovers against me

may be disclosed along with any other relevant information, which may be known to the police.

If needed, I understand that, if I am a UK resident, a check will be made with the Disclosure and Barring Service (DBS) and that it is an offence for any person to commence Regulated Activity without first providing a valid DBS Disclosure. If I am an overseas resident, I understand that I

will

need to provide a police check from my home nation if the position I am appointed to requires it.

I agree to inform the person within the YWAM base/team responsible for processing applications for

Disclosure and Barring Service checks if I am convicted of an offence after I take up any post within

YWAM England. I understand that failure to do so may lead to the immediate suspension of my work

with children or vulnerable adults and/or the termination of my work/training association with

YWAM.

I agree to inform the person within YWAM responsible for processing applications for the Disclosure and Barring Service if I become the subject of a police and/or a social services/(Children's Social care

or Adult Social Services)/social work department investigation. I understand that failure to do so may lead to the immediate suspension of my work with children or

vulnerable adults and/or the termination of my work/training and association with YWAM. Due to the nature of the living environment for most of our YWAM teams, with staff and families with

small children living in close proximity, we need to also ask you to sign this statement.

I confirm that I am not barred from working with children/vulnerable adults.

**I have read and agree with the DECLARATIONS, CONSENT FOR TREATMENT and RELEASE OF LIABILITY above, and I declare that I have completed this application truthfully, to the best of my knowledge.**

Signature\_\_\_\_\_ Date(dd/mm/yy)\_\_\_\_\_ Printed Name\_\_\_\_\_

# Personal Health Disclosure

## APPLICANTS NAME

- Please complete all sections of this reference.
- It will help us if you type your answers or print carefully in black/blue ink.
- If you need more space to answer a question, please use a separate piece of paper.
- Husbands and wives must supply separate disclosures.
- We reserve the right to ask you to have a medical reference completed by a medical doctor (or psychiatrist if appropriate), depending on the advice of our Medical Officer.

**YOUR HONEST INFORMATION WILL HELP US TO EFFECTIVELY ASSESS YOUR  
APPLICATION AND BEST CONSIDER YOUR NEEDS.**

## APPLICANT'S RELEASE OF MEDICAL INFORMATION

I \_\_\_\_\_(applicant's name), give permission for medical information to be reviewed by YWAM's medical officer (i.e. registered nurse, medical doctor, psychiatrist or suitably qualified allied health professional) for purposes of assessing my suitability for service with Youth With A Mission.

I give permission for the release of relevant medical information to the Youth With A Mission medical officer in consultation, if necessary, with the personnel manager or team leader only.

Signed \_\_\_\_\_ Date dd/mm/yy) \_\_\_\_\_

**PLEASE RETURN THIS FORM TO:**

**58a St Pancras Way  
London NW1 0RB**

Date of Birth \_\_\_\_\_

Position being applied for \_\_\_\_\_

## 1. GENERAL HEALTH

Are you able to walk up to six miles (10 kilometres) in one day?  Yes  No

If this is an issue, please explain: \_\_\_\_\_

Are you able to carry out reasonably strenuous physical work?  Yes  No

If no, please explain: \_\_\_\_\_

Are you presently in good health?  Yes  No

If no, please give brief details: \_\_\_\_\_

## 2. MEDICAL HISTORY

Have you ever had or been treated for any of the following?

Malaria or other tropical/infectious diseases	Yes/No
High blood pressure, heart problems or stroke	Yes/No
Arthritis or any back, muscle or joint problems	Yes/No
Gastric or duodenal ulcers, colitis or intestinal diseases	Yes/No
Epilepsy, seizures or other neurological diseases	Yes/No
Kidney stones or other kidney or bladder diseases	Yes/No
Asthma or other respiratory diseases	Yes/No
Diabetes	Yes/No
Cancer or tumours of any kind	Yes/No

If yes, please give details

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List all the serious illnesses and operations you have had in the past. (This means any illness requiring hospital admission, treatment from your doctor for an illness lasting more than one month, or any illness that may have an affect on your health both now and in the future.)

Please also state the outcome and whether there are any residual problems.

Illness/Operation	Date	Outcome
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If yes, please give details

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Have you ever received professional counselling/and or psychiatric support? Yes/No

If yes, please give details

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List any serious mental or physical illness in your immediate family

Illness

Family Member

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Is there any other information that will be helpful for us to know as we consider your application?

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Do you have any allergies? (Please list all below)

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**Disclosing information in this section does not necessarily preclude you from acceptance.**

**These questions are to help us assess whether YWAMs lifestyle is suitable for you at the present moment.**

#### **4.VACCINATIONS**

*Due to our close living conditions, we require all staff and trainees to be up to date with their vaccinations.*

Did you complete your childhood vaccines?

Yes/No

Rubella (single dose) or MMR  Yes  No

Date of vaccination \_\_\_\_\_

Tetanus (every 10 years)  Yes  No

Date of vaccination \_\_\_\_\_

(We require a booster within last 10 years, especially if travelling to developing nations)

If these are not available in your country, we will require you to have them within one month of arrival, at your own expense. You may require additional vaccinations if travelling to certain nations during your time in YWAM.

## **5 FOR WOMEN ONLY**

Do you have any obstetric or gynecological conditions that currently affect you? (eg. Issues with past pregnancies or menstrual periods that affect your daily functioning?) If yes, please explain.

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**I confirm that this is a true reflection of my health & wellbeing history and that failure to give any relevant information may lead to my involvement with Youth With A Mission being terminated.**

Signed \_\_\_\_\_

Date: \_\_\_\_\_

# Emergency Contact

## 1. PERSONAL DETAILS

Surname \_\_\_\_\_ Title \_\_\_\_\_ First name \_\_\_\_\_  
Preferred name \_\_\_\_\_

## 2. EMERGENCY CONTACT

For all applicants (someone other than your spouse if married)

Surname \_\_\_\_\_ Title \_\_\_\_\_  
First Names \_\_\_\_\_ Preferred Name \_\_\_\_\_  
Relationship to you \_\_\_\_\_  
Address \_\_\_\_\_  
Post/Zip code \_\_\_\_\_ Country \_\_\_\_\_  
Telephone (daytime) \_\_\_\_\_ (Evening) Mobile \_\_\_\_\_  
Email \_\_\_\_\_

Can this person be contacted in English Yes No  
If not, what language do they speak \_\_\_\_\_

**PLEASE RETURN THIS FORM TO:**

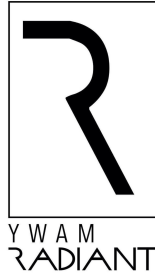
**58a St Pancras Way**

**London NW1 0RB**

**or**

**Email: [trainingywamradiant@gmail.com](mailto:trainingywamradiant@gmail.com)**





# Confidential Reference

To be completed by a mature Christian friend

Reference for: \_\_\_\_\_ (Applicant's name)

Youth With A Mission (YWAM) is a worldwide inter-denominational missionary organisation. It provides opportunities for voluntary Christian service on a short- or long-term basis. The applicant has given your name as a referee. In accordance with the Data Protection Act 2018, please confine your answers to what you know of the applicant from your own experience.

- Please complete sections 2–7 of this reference and return it to the address below or email it to us at the address below. If you would prefer to give additional comments by telephone, please feel free to do so. We would appreciate it if you would keep this confidential and not give it back to the applicant unless it's in a sealed envelope.
- In order to adequately evaluate the applicant for admission to YWAM (location) we would appreciate you supplying the information requested in this form as openly and honestly as you can. Your statement will help us to effectively meet the needs of the applicant should their application be successful.
- Receipt of this form is necessary before we can consider the application. Thank you for taking the time to complete this reference on the applicant's behalf.

Please post to:  
YWAM Radiant London  
58a St Pancras Way  
London NW1 0RB  
Email: [trainingywamradiant@gmail.com](mailto:trainingywamradiant@gmail.com)



Self-Leadership												
Ability to flow/Teachable												
Flexibility												
Reliability/Keeping Commitments												
Response to authority												
Time keeping/punctuality												
Perseverance												
Sound Judgement												
Attitude to work												
Leadership Capability												

Resilience												
Personal Organisation												
Trustworthy												
Academic Ability												
General Health												
Moral Standards												

If you would like to comment further on any of the above, please do so here:

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### Christian Experience

In association with the applicant, what has been the level of commitment to your church/YWAM location?

Faithful

Inconsistent

Other

In your consideration, which of the following would best describe the applicant's Christian experience? Please tick all that apply

- New believer
  - Genuine and growing
  - Superficial
  - Over-emotional/self-focused
  - Variable/inconsistent
  - Mature
  - Openly shares faith with others
  - Unmotivated
  - Other
- Please expand:

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## Emotional Stability

Please select one statement that best suits the applicant's maturity and stability and please comment on it.

- Outstanding - mature. Has proven their 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 endure stressful situations
- Applicant has frequently demonstrated signs of inability to cope with stress such as rage or withdrawal; is erratic in attitude and action; has demonstrated emotional instability in other ways
- Other - please specify

Please expand:

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## Challenging situations

How does the applicant usually respond to challenging situations? Please comment below.

- Withdraws
- Holds Offense
- Gets angry/complains
- Gets discouraged

- Gives up
- Accepts patiently
- Meets constructively
- Rises to the challenge
- Other - please specify

Please expand:

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## Areas for growth

Please check words or descriptions if they apply to the applicant, then comment below.  
*Please note that we are seeking to help the applicant grow.*

Anxious/frequently worried	
moody	
Impatient	
Critical of others	
Intolerant	
Easily Offended	
Argumentative/Erratic attitudes or actions	
Domineering	
Addictive Behaviour	
Nervous/tense	
Unteachable	
Rebellious	
Closed/'loner'	
Socially Awkward	
Prejudiced towards groups/races/nationalities	
Low self-esteem/lack of self-confidence	
Problems with authority	
Immature	

Other: _____	
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Please expand:

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## Giftings

In your opinion, in which of the following areas of ministry in the applicant gifted?

Administration		Medical	
Art/Creativity		Music	
Children's Work		Pastoral Care	
Communications		Pioneer	
Counselling		Prayer/Intercession	
Discipleship		Preaching	
Drama/theatre		Problem Solving	
Encouragement		Servant Hearted	
Evangelism		Teaching	
Healing		Worship	
Hospitality		Youth Work	
Skilled Tradesman (Carpentry/Plumbing)		Other: _____	
Media			

Please expand:

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## Family Background

Please comment briefly on the applicant's family background and current situation (if known)

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## Motives

In your opinion, what are the applicant's motives for applying to join YWAM... (location)

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Do you think participation in YWAM would be beneficial for the applicant?

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Do you think YWAM would benefit from the applicant serving with us?

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Do you recognise that this person has a calling to Missions?

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## Additional Comments

Would you employ/work with this person?

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What personal experience do you have of the volunteer's ability to work with/relate to children and/or young people?

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Please make any additional comments regarding the applicant, which you consider could be helpful.

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## DATA PROTECTION

In accordance with the Data Protection Act 2018, the information provided on my internship application form will be held securely, confidentially and only used for the purposes needed.

WAIVER OF CONFIDENTIALITY Under the Data Protection Act, an individual has the right to request to see their references with the permission of the author.  
Would you be willing for this reference to be disclosed to the applicant on request?  
 Yes  No

## REFEREE'S DETAILS

Name \_\_\_\_\_

Address \_\_\_\_\_ Post/Zip Code \_\_\_\_\_

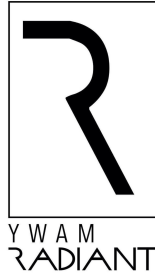
Telephone \_\_\_\_\_ Mobile \_\_\_\_\_ Email address \_\_\_\_\_ Are you  
fluent in English?  Yes  No

If not, which language would you prefer to speak, if we need to contact you?

\_\_\_\_\_

Signed \_\_\_\_\_ Date (dd/mm/yy) \_\_\_\_\_





# Confidential Reference

To be completed by your employer/teacher

Reference for: \_\_\_\_\_ (Applicant's name)

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Ability to flow/Teachable												
Flexibility												
Reliability/Keeping Commitments												
Response to authority												
Time keeping/punctuality												
Perseverance												
Sound Judgement												
Attitude to work												
Leadership Capability												

Resilience												
Personal Organisation												
Trustworthy												
Academic Ability												
General Health												
Moral Standards												

If you would like to comment further on any of the above, please do so here:

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## Emotional Stability

Please select one statement that best suits the applicant's maturity and stability and please comment on it.

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- More mature and emotionally stable than average
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- Doubtful - Experience has shown that the applicant might not be able to endure stressful situations
- Applicant has frequently demonstrated signs of inability to cope with stress such as rage or withdrawal; is erratic in attitude and action; has demonstrated emotional instability in other ways

Other - please specify

Please expand:

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## Challenging situations

How does the applicant usually respond to challenging situations? Please comment below.

- Withdraws
- Holds Offense
- Gets angry/complains
- Gets discouraged
- Gives up
- Accepts patiently
- Meets constructively
- Rises to the challenge
- Other - please specify

Please expand:

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## Areas for growth

Please check words or descriptions if they apply to the applicant, then comment below.  
*Please note that we are seeking to help the applicant grow.*

Anxious/frequently worried	
moody	
Impatient	
Critical of others	
Intolerant	
Easily Offended	
Argumentative/Erratic attitudes or actions	
Domineering	

Addictive Behaviour	
Nervous/tense	
Unteachable	
Rebellious	
Closed/'loner'	
Socially Awkward	
Prejudiced towards groups/races/nationalities	
Low self-esteem/lack of self-confidence	
Problems with authority	
Immature	
Other: _____	

Please expand:

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## Areas of Strength

Please comment on their areas of strength:

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## Family Background

Please comment briefly on the applicant's family background and current situation (if known)

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## Motives

In your opinion, what are the applicant's motives for applying to join YWAM...

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Do you think participation in YWAM would be beneficial for the applicant?

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Do you think YWAM would benefit from the applicant serving with us?

### **Additional Comments**

Would you employ/work with this person?

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Please make any additional comments regarding the applicant, which you consider could be helpful.

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#### **WAIVER OF CONFIDENTIALITY**

Under the Data Protection Act, an individual has the right to request to see their references with the permission of the author. Would you be willing for this reference to be disclosed to the applicant on request?  Yes  No

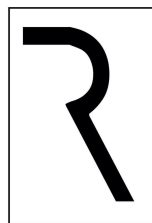
#### **REFEREE'S DETAILS**

Name \_\_\_\_\_  
Address \_\_\_\_\_ Post/Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_  
Mobile \_\_\_\_\_  
Email address \_\_\_\_\_

Are you fluent in English?  Yes  No

If not, which language would you prefer to speak, if we need to contact you? \_\_\_\_\_

Signed \_\_\_\_\_ Date (dd/mm/yy) \_\_\_\_\_



Y W A M  
RADIANT

## **Confidential Reference**

To be completed by your Church leader

Reference for: \_\_\_\_\_ .(Applicant's name)

Youth With A Mission (YWAM) is a worldwide inter-denominational missionary organisation. It provides opportunities for voluntary Christian service on a short- or long-term basis. The applicant has given your name as a referee. In accordance with the Data Protection Act 2018, please confine your answers to what you know of the applicant from your own experience

- Please complete sections 2–7 of this reference and return it to the address below or email it to us at the address below. If you would prefer to give additional comments by telephone, please feel free to do so. We would appreciate it if you would keep this confidential and not give it back to the applicant unless it's in a sealed envelope.
- In order to adequately evaluate the applicant for admission to YWAM (location) we would appreciate you supplying the information requested in this form as openly and honestly as you can. Your statement will help us to effectively meet the needs of the applicant should their application be successful.
- Receipt of this form is necessary before we can consider the application. Thank you for taking the time to complete this reference on the applicant's behalf.

Please post to:  
YWAM Radiant London  
58a St Pancras Way  
London NW1 0RB  
Email: [trainingywamradiant@gmail.com](mailto:trainingywamradiant@gmail.com)

What is your relationship with the applicant? Please indicate below

Employer	
Teacher	
Pastor/Minister/Church Elder	
Other Christian Leader	
Mature Christian Friend	





Sound Judgement												
Attitude to work												
Leadership Capability												

Resilience												
Personal Organisation												
Trustworthy												
Academic Ability												
General Health												
Moral Standards												

If you would like to comment further on any of the above, please do so here:

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## Christian Experience

In association with the applicant, what has been the level of commitment to your church/YWAM location?

Faithful

Inconsistent

Other

In your consideration, which of the following would best describe the applicant's Christian experience? Please tick all that apply

- New believer
- Genuine and growing
- Superficial
- Over-emotional/self-focused
- Variable/inconsistent
- Mature
- Openly shares faith with others
- Unmotivated
- Other

Please expand:

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## Emotional Stability

Please select one statement that best suits the applicant's maturity and stability and please comment on it.

- Outstanding - mature. Has proven their 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 endure stressful situations
- Applicant has frequently demonstrated signs of inability to cope with stress such as rage or withdrawal; is erratic in attitude and action; has demonstrated emotional instability in other ways
- Other - please specify

Please expand:

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## Challenging situations

How does the applicant usually respond to challenging situations? Please comment below.

- Withdraws
- Holds Offense
- Gets angry/complains
- Gets discouraged
- Gives up
- Accepts patiently
- Meets constructively
- Rises to the challenge
- Other -  please specify \_\_\_\_\_

Please expand:

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## Areas for growth

Please check words or descriptions if they apply to the applicant, then comment below.  
*Please note that we are seeking to help the applicant grow.*

Anxious/frequently worried	
moody	
Impatient	
Critical of others	
Intolerant	
Easily Offended	
Argumentative/Erratic attitudes or actions	
Domineering	
Addictive Behaviour	
Nervous/tense	
Unteachable	
Rebellious	
Closed/'loner'	
Socially Awkward	
Prejudiced towards groups/races/nationalities	
Low self-esteem/lack of self-confidence	
Problems with authority	
Immature	
Other: _____	

Please expand:

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## Giftings

In your opinion, in which of the following areas of ministry in the applicant gifted?

Administration		Medical	
Art/Creativity		Music	
Children's Work		Pastoral Care	
Communications		Pioneer	
Counselling		Prayer/Intercession	
Discipleship		Preaching	
Drama/theatre		Problem Solving	
Encouragement		Servant Hearted	
Evangelism		Teaching	
Healing		Worship	
Hospitality		Youth Work	
Skilled Tradesman (Carpentry/Plumbing)		Other: _____	
Media			

Please expand:

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## Family Background

Please comment briefly on the applicant's family background and current situation (if known)

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## Motives

In your opinion, what are the applicant's motives for applying to join YWAM... (location)

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Do you think participation in YWAM would be beneficial for the applicant?

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Do you think YWAM would benefit from the applicant serving with us?

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Do you recognise that this person has a calling to Missions?

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### **Additional Comments**

Would you employ/work with this person?

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What personal experience do you have of the volunteer's ability to work with/relate to children and/or young people?

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Please make any additional comments regarding the applicant, which you consider could be helpful.

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### **DATA PROTECTION**

In accordance with the Data Protection Act 2018, the information provided on my internship application form will be held securely, confidentially and only used for the purposes needed.

#### **WAIVER OF CONFIDENTIALITY**

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#### **REFEREE'S DETAILS**

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Email address \_\_\_\_\_

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Signed \_\_\_\_\_ Date (dd/mm/yy) \_\_\_\_\_