



## *YWAM Rostov-on-Don* Staff Application

Complete Name: \_\_\_\_\_ (*married couples separate form*)

Position(s) Applied For:

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Country: \_\_\_\_\_ Phone/fax: \_\_\_\_\_

Nationality: \_\_\_\_\_ Sex: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Marital Status:    Single     Married     Divorced     Children: \_\_\_\_\_

Passport #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

Languages spoken & proficiency: \_\_\_\_\_

Home Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

Address: \_\_\_\_\_

Pastor: \_\_\_\_\_ Phone: \_\_\_\_\_

### ***Personal Information:***

Please answer the following questions briefly, on a separate sheet of paper:

1. How long have you been a Christian and describe your conversion experience?
2. Where did you take your DTS? List other schools taken.
3. Describe your present relationship with the Lord.
4. What giftings and callings do you have?
5. What is your educational and work experience?
6. Why do you want to serve with YWAM Rostov? What are your goals and what do you see yourself doing with YWAM Rostov?
7. Will you have a minimum of \$500 (US) monthly support? Present amount?
8. Please describe any talents or special abilities you may have (eg. drama, dance, music, sports, professions).
9. Please state any special medical needs or disabilities.

10. List the names of your two references (Pastor and DTS leader).
11. Describe your family relationship and are they supportive?
12. How long are you ready to commit to the ministry of YWAM Rostov?
13. Is there anything else we need to know about you or your life?

- \* Please enclose a passport size photo with this application and have both confidential references sent separately or sealed with the enclosed application. Allow one month for processing.
- \* One reference form must be given to your **Pastor** and one to your former **DTS Director**. We would also ask that you visit your local doctor, for a check-up, before coming to Rostov-on-Don.
- \* Upon acceptance, you will be given detailed instructions concerning visa, flight information, packing and other helpful ways to prepare.
- \* Please also fill in the Health form (P-003) and attach to your application

***Emergency Contact:***

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

***Liability Release: (please read carefully)***

I do hereby agree to adhere to the policies and procedures established by Youth With A Mission Rostov-on-Don and its representatives.

I do hereby agree that as a Youth With A Mission staff member I volunteer my time, talents and ministry without a salary from Youth With A Mission.

I understand that Youth With A Mission has the right to terminate my involvement as a staff or student member at any time and for any cause, which they deem suitable without recompense.

I do hereby hold harmless and indemnify Youth With A Mission and their employees or agents in the event that I am injured, or suffer loss or expense during my involvement. I also give Youth With A Mission and their agents authority to authorize emergency medical treatment to myself in the event of injury, and I shall be responsible for the payment of any such medical treatment.

Signature: \_\_\_\_\_

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