



House of Prayer Port Moresby

A ministry of Youth with Mission (YWAM)

P.O.Box 1970 Vision City, N.C.D. Papua New Guinea

Location of prayer room: Salvation Army Motel, Lahara Ave., Boroko, Port Moresby

Email: internship@houseofprayer.com Phone: 7836 3139

INTERNSHIP APPLICATION FORM

Requirements for internship application:

- Complete application form with photograph (a recent passport-type picture)
- One Confidential Reference Form compiled by an authority figure in your life (father, pastor, teacher, boss, youth leader, etc.)

I. PERSONAL INFORMATION

Last Name	
First/ Middle Name	
Street/ P.O. Box No.	
Zip Postal Code/City	
State/ Province	
Country	
Home Phone	
Work Phone	
Mobile Phone	
Email	

Age: ____ Birthday: _____ Sex: Male () Female () Place of Birth: _____

Marital Status: Single () Married () Separated () Divorced () Engaged () Widowed ()

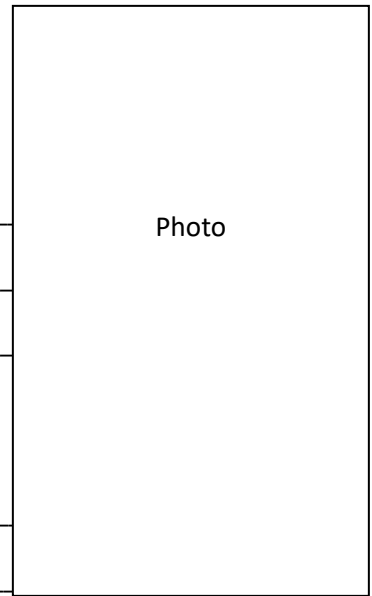
Spouse's Name: _____

Names of children accompanying you:

Name: _____ Age: _____ Name: _____

Name: _____ Age: _____ Name: _____

Name: _____ Age: _____ Name: _____



II. CHURCH INFORMATION

Church's Name: _____

Pastor's Name: _____ Denomination: _____

Email: _____ Phone: _____

Does your pastor approve of your application in the House of Prayer Port Moresby? Yes () No ()

If no, why?

III. CHRISTIAN LIFE AND CALLING

Please type or write your answers on a separate sheet of paper to EACH of the following questions:

- A. Are you baptized in the Holy Spirit? If yes, when? Are you praying in tongues?
- B. What is your motivation to join this internship?
- C. What is your life calling? What are your dreams for your life? How do you see the vision of House of Prayer fitting into your life calling?
- D. Is your immediate family supportive of your application at this ministry?
- E. List anything else we should know about you and your situation.

IV. MINISTRY INFORMATION

Previous YWAM experience:

Have you attended YWAM **schools** so far? () Yes, please list them down. () No

() DTS Location: _____ Date: _____

() 2nd level school
Name of the school: _____ Location: _____ Date: _____

Have you ever been a YWAM **staff**? Yes () No ()

If yes, what location, how long did you work there and what was your position?

Have you been a full-time staff in another ministry (mission’s organization, church, etc.)? Yes () No ()

Please specify.

Location	Dates	Position	Name of Leader/ Dept. Head

V. YOUR OWN CHARACTER SURVEY

Would you describe yourself as: strong, growing, struggling or weak in the following areas:

- a) honesty (truthfulness)
- b) honesty in finances
- c) emotional stability
- d) morality in relationships (romantic/ sexual)
- e) reliability

Have you or are you struggling with one of the following issues:	before	now
addictions (smoking, drugs, alcohol, tv, food, sexual etc.) please specify		
occultism		
witchcraft		
forgiveness		
jealousy		
harden heart		

VI. YOUR PRAYER LIFE

What’s the first thing that comes to your mind when you hear “house of prayer”? How would you describe it.

What kind of intercessor are you? Please check

- a) () praying through lists – I like to pray through lists of prayer requests
- b) () crisis intercessor – if there is an urgent need you are right there
- c) () focus on worship and adoration
- d) () prophetic intercessor – I easily receive impression, pictures, songs etc.
- e) () praying in tongues
- f) () others _____

What do you have a burden to pray for? What do you like to pray for? What do you have faith for? Please don’t check more than 5.

Worship – just because He is worth it	()	
Individuals	()	Which?

A certain people group (e.g. youth, doctors, families, politicians, celebrities, etc.)	()	Which?
Unbelievers	()	
Leaders	()	
Politicians, society	()	
My city or other cities	()	Specify which?
My region	()	
My nation	()	
Other nations	()	Which?
Certain topics or others	()	Which?

VI. BACKGROUND/ EDUCATIONAL HISTORY

I have completed secondary high school. Yes () No ()

Highest educational attainment: _____

Occupational Skills:

Musical abilities / or other talents:

VIII. FINANCES AND ACCOMODATION

The internship fee is PGK 200 for each block. I am aware that these fees need to be paid every Thursday night when the block starts.

VIII. GENERAL INFORMATION

We consider for every intern to be open and have a teachable heart? Will you be willing to accept our leadership, and will we be allowed to speak into your life? Would you give us permission to shape your life? We try to serve the Lord and you as best as we can.

This is our first internship and as a ministry we are still in the pioneering stage. This special season will need a lot of flexibility and creativity but also allows a lot of initiative and input from your side.

With signing this application form you agree to all the above. All your information will be treated confidential.

 Signature over printed name

 Date

CONFIDENTIAL REFERENCE FORM FOR EMPLOYER / PASTOR / MINISTRY LEADER FOR OUR INTERNSHIP

To the Applicant: Please complete the information below, hand the paper to your referee and provide a confidential way for us to receive the reference.

Applicant's Name: _____
Family Name
First Name
Middle

Applicant's phone number _____ Applicant's email: _____

The above applicant has applied to be on a 2 month full time internship program with WanTALK24seven – A ministry of Youth With A Mission (YWAM). YWAM is an international, interdenominational missionary organization founded in 1960. YWAM has over 25,000 permanent staff at 1,100 centers in 180 nations. Its purposes include training, evangelism and mercy ministries.

Serious consideration is given to your comments; therefore, we ask that you complete this form carefully. Thank you for

How well do you know the applicant? Very well () well () casually ()

How long have you known the applicant? _____years _____months

Comments:

Initiative	() Superior () Above average () Below average () Inferior	
Social adaptability	() Superior () Above average () Below average () Inferior	
Concern for others	() Superior () Above average () Below average () Inferior	
Ability to follow	() Superior () Above average () Below average () Inferior	
Leadership	() Superior () Above average () Below average () Inferior	
Judgement / Decision making	() Superior () Above average () Below average () Inferior	
Emotional Stability	() Superior () Above average () Below average () Inferior	
Health	() Superior () Above average () Below average () Inferior	
Personal Appearance	() Superior () Above average () Below average () Inferior	
Mental Ability	() Superior () Above average () Below average () Inferior	
Industry	() Superior () Above average () Below average () Inferior	
Reliability	() Superior () Above average () Below average () Inferior	
Cooperativeness	() Superior () Above average () Below average () Inferior	
Flexibility	() Superior () Above average () Below average () Inferior	

Christian Character	() Superior () Above average () Below average () Inferior	
Disposition	() Superior () Above average () Below average () Inferior	
Punctuality	() Superior () Above average () Below average () Inferior	
Financial responsibility	() Superior () Above average () Below average () Inferior	

(Please use additional paper if necessary in answering the following questions)

1. Describe the applicant's strengths:

2. Describe the applicant's areas of growth:

3. In your association of the applicant, what has been the level of commitment exemplified?

() faithful () inconsistent () other (please comment):

4. Describe how the applicant responds to authority:

5. Please comment on the applicant's family background:

6. Please add any other relevant remarks that you feel we should know more about to be of better service to them:

7. Would you recommend the applicant for acceptance into this training?

() yes () With some reservations (please explain) () No (please explain)

I declare that the contents of this confidential reference are correct and true to the best of my knowledge.

Signature: _____ Phone: _____

Name: _____ Email: _____

Street/P.O. Box No.: _____

ZIP Postal Code / City / State/ Province / Country: _____

_____ Date: _____

Would you like to receive further information about wanTALK24seven () Yes () No

Thank you for your time!