



# Juventud Con Una Misión

Principles In Child and Youth Ministry Puerto Rico (PCYM)

March 30 – August 9, 2014.

## Application

**This application form is not complete in itself. Please also have your application file transferred from your previous DTS school. As well as the two reference forms (from YWAM Leader, Pastor or friend).**

Name: \_\_\_\_\_ Male  Female

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

City: \_\_\_\_\_ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone : (\_\_\_\_) \_\_\_\_\_ Nationality: \_\_\_\_\_ Birth date: \_\_\_\_\_

Marital Status:  Single  Married  Separated  Divorced  Engaged

(If married), Husband's/ wife's name: \_\_\_\_\_

Name of the children coming with you:

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_

Address: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

YWAM DTS: \_\_\_\_\_ Year: \_\_\_\_\_ Leader: \_\_\_\_\_

Other YWAM experience: \_\_\_\_\_

Home Church: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Pastor's name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

### PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. What specific fields of ministry are you interested in?
2. What has been your experience in this area?
3. What are your objectives for coming to the PCYM and after the school?
4. Do you presently have all your finances for the school? Yes \_\_\_ No \_\_\_ If not, how do you plan to pay it?
5. How was your conversion experience?
6. Mark in which of these practices have you been involved:

<input type="checkbox"/> White Magic	<input type="checkbox"/> Fetishes	<input type="checkbox"/> Hypnosis	<input type="checkbox"/> Cults
<input type="checkbox"/> Witchcraft	<input type="checkbox"/> Pre-Marital Sex	<input type="checkbox"/> Tarot Card Reading	<input type="checkbox"/> Atheism
<input type="checkbox"/> Heavy Rock Music	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Telepathy	<input type="checkbox"/> Horoscope
<input type="checkbox"/> Drugs	<input type="checkbox"/> Communism	<input type="checkbox"/> Homosexuality	<input type="checkbox"/> Black Magic

Yes. I have enclosed my \$25.00 Non-refundable application fee (same for couples or singles.)

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

P.O. Box 116, Juncos, Puerto Rico 00777

Phone: (787)734-4788

E-mail: [jucumpr@coqui.net](mailto:jucumpr@coqui.net)



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March 30 – August 9, 2014.

**Confidential Evaluation**

Name of the Applicant: \_\_\_\_\_

**The above applicant has applied for participation in Principles in Child and Youth Ministry School. Serious consideration will be given to your comments, so we would greatly appreciate your careful and thoughtful completion of this form. All evaluations will be kept in strict confidence and will not be shown to the applicant. Please mail completed form to the address listed below. Thank you so much for your time and assistance.**

Your relationship to the applicant:  Employer  Teacher  Pastor  Friend  YWAM Leader

How well do you know the applicant?  Very Well  Well  Casually

Length of time of your acquaintance with the applicant: \_\_\_\_\_ years \_\_\_\_\_ months

Please check the following and comment as necessary.

	Excellent	Very Well	Regular	Developing	Weak
Leadership					
Christian character (integrity, men or woman of word)					
Positive contagious spirit					
Ability to motivate others					
Attitude to receive correction					
Self confidence					
Willing to serve/ responsible					
Emotional stability					
Communication skills					
Mental ability					
Financial responsibility					
Maturity and Integrity					
Assurance of God's calling					
Teachable					

Which of the following would best describe the applicant's Christian experience?

Mature  Contagious  Genuine and growing  Emotional  Superficial

With reference to his/her Christian service, is the applicant:  Dedicated  Average  Poor

Comments: \_\_\_\_\_  
\_\_\_\_\_

What role does the applicant generally take in a cooperative team effort? \_\_\_\_\_

Evaluation of applicant's skill/trade/profession: \_\_\_\_\_  Superior  Average  Regular  Poor

Other skills: \_\_\_\_\_

Listed below are tendencies which may reduce the effectiveness of the Christian worker. Please check if one applies:

- |  |   |  |                                       |
|--|---|--|---------------------------------------|
| <input type="checkbox"/> Impatient         | <input type="checkbox"/> Easily embarrassed | <input type="checkbox"/> Tense               | <input type="checkbox"/> Infatuations |
| <input type="checkbox"/> Intolerant        | <input type="checkbox"/> Easily offended    | <input type="checkbox"/> Moody               | <input type="checkbox"/> Impulsive    |
| <input type="checkbox"/> Argumentative     | <input type="checkbox"/> Lacking humor      | <input type="checkbox"/> Dissuaded, isolated | <input type="checkbox"/> Nervous      |
| <input type="checkbox"/> Domineering       | <input type="checkbox"/> Frequently worried | <input type="checkbox"/> Prejudiced          | <input type="checkbox"/> Arrogant     |
| <input type="checkbox"/> Anxious           | <input type="checkbox"/> Easily angered     | <input type="checkbox"/> Murmured            | <input type="checkbox"/> Critical     |
| <input type="checkbox"/> Often discouraged | <input type="checkbox"/> Other: _____       |  |                                       |

To your knowledge, has the applicant ever been arrested for any offenses?  Yes  No

To your knowledge, has the applicant ever been involved in  drugs  homosexuality  occult?

Is the applicant financially responsible?  Yes  No

Do you recommend that the applicant be accepted into the school?  Yes  No  With some reservations

Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there anything else which would be helpful for us to know? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Please print: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Your address: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-mail address: \_\_\_\_\_