

# Summer Internship Application

Please include (2) passport photos and the \$75 non-refundable application fee  
*Must be postmarked by February 25, 2008*

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_

MALE  FEMALE  AGE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

DO YOU HAVE A VALID PASSPORT? YES  NO

T-SHIRT SIZE S M L XL 2X

## EMERGENCY CONTACT

NAME \_\_\_\_\_

RELATIONSHIP TO YOU \_\_\_\_\_

HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

## CHURCH

CHURCH YOU CURRENTLY ATTEND \_\_\_\_\_

HOW LONG HAVE YOU ATTENDED? \_\_\_\_\_

SENIOR PASTOR \_\_\_\_\_ YOUTH PASTOR/LEADER \_\_\_\_\_

WHAT AREAS (IF ANY) ARE YOU INVOLVED IN? \_\_\_\_\_

## PERSONAL HISTORY (please mark those that apply)

Have you... (in the last 12 months)

- |  |  |
|--|--|
| <input type="radio"/> Spent time in jail                                   | <input type="radio"/> Been involved in homosexual activities             |
| <input type="radio"/> Been sexually active (if not married)                | <input type="radio"/> Intentionally inflicted harm on yourself           |
| <input type="radio"/> Viewed pornography                                   | <input type="radio"/> Attempted suicide                                  |
| <input type="radio"/> Been convicted of a crime                            | <input type="radio"/> Been pregnant or fathered a child (if not married) |
| <input type="radio"/> Used tobacco, drugs or alcohol                       | <input type="radio"/> Been involved in gang related activities           |
| <input type="radio"/> Been involved in satanism, witchcraft, or the occult | <input type="radio"/> Had an eating disorder                             |
| <input type="radio"/> Taken depression or behavioral medicine              | <input type="radio"/> Had psychiatric care                               |

If you answered yes to any of these questions please give a brief explanation on a separate sheet of paper.

## GENERAL

DO YOU OWN A VEHICLE? YES  NO  (vehicle strongly recommended)

HAVE YOU EVER ATTENDED CAMP DECISION? IF SO, HOW MANY YEARS? \_\_\_\_\_

IF YOU HAVE ATTENDED AS A WORKER, PLEASE LIST ANY JOBS YOU HAD \_\_\_\_\_

DO YOU HAVE ANY PHYSICAL LIMITATIONS, SPECIAL DIETARY REQUIREMENTS, DISABILITIES OR AILMENTS (DIABETES, ALLERGIES TO FOODS/MEDICATIONS, ETC) THAT WE SHOULD KNOW ABOUT?

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### TRAINING

PLEASE INDICATE WHICH PROGRAMS YOU ARE EXPERIENCED IN (mark circles that apply)

- |  |   |                                       |
|--|---|---------------------------------------|
| <input type="radio"/> Microsoft Access     | <input type="radio"/> Microsoft Publisher | <input type="radio"/> Adobe Audition  |
| <input type="radio"/> Microsoft Excel      | <input type="radio"/> Microsoft Word      | <input type="radio"/> Adobe Photoshop |
| <input type="radio"/> Microsoft Powerpoint | <input type="radio"/> Sound Forge         | <input type="radio"/> Adobe Premiere  |

WHICH VOCATIONAL CATEGORY ARE YOU INTERESTED IN?

- Administration (computer, office)
- Multimedia Production (video editing, graphic design, lighting, sound)
- Music (instruments, vocals)
- Public Relations (events, people skills)

PLEASE EXPLAIN YOUR EXPERIENCE IN THE CATEGORY YOU INDICATED (ex: Music—I have played the guitar in my youth worship team for 5 years.)

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### YOU & GOD

Please send in a 2-5 minute video answering the following questions (YES, it *has* to be a video):

1. Tell us when you came to know Christ and describe your current relationship with Him.
2. Why do you want to be a part of the Summer Internship?
3. What are you expecting to gain out of the Summer Internship?

### HONOR CODE

Recognizing Jesus as the author and finisher of my faith, and the Word of God as the supreme standard for all wisdom and knowledge, it is my aim to develop myself accordingly. I recognize the call God has on my life and will endeavor to develop the gifts and abilities He has given me. Through my participation in this internship I will bring glory and honor to the name of Jesus and allow the love of God to flow through me.

I hereby confirm that I have been honest in completing this application and have answered the questions to the best of my ability. I understand the submission of this application DOES NOT ensure acceptance to the program and that Decision Ministries reserves the right to deny my admittance to the program upon their discretion. If accepted I will submit myself to the established leadership of the internship and/or any rules/guidelines that may be set.

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SIGNATURE OF APPLICANT

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DATE

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PARENT SIGNATURE (required if applicant is under the age of 18)

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DATE