



Discipleship, training, and mobilization for missionaries from all nations

YWAM Madang Student Application Form

Course: Discipleship Training School (DTS)

Personal Details and Contact Information

Name (as it appears on your passport)

Surname _____ First Name _____

Preferred Name _____ Age _____ Date of Birth _____

Place of Birth _____

Marital Status: Single/ Married/ Divorced/ Widowed Gender: Male/Female

If married; Married couples please fill out separate applications. Give children's name, age, and sex below If married and/or have children will your family be coming with you while you do the school? Yes or No

Children: _____

Permanent Address:

Mobile Phone Number _____ Email Address _____

Passport, Nationality and Language Information

Nationality: _____ Passport Number: _____ Expiry Date: _____

Circle the languages that you speak fluently. English/Tik Pisin/Mother Tongue _____ Others _____

Church Information

Home Church: _____ Pastor's Name: _____

Denomination: _____ Church Address: _____

Education and Job Experience

List any work experience, position, company and how long you worked there: _____

What Level of education did you complete? _____

Have you done any further educational training? _____

Have you worked with any other ministries? Yes or No If Yes, where and how long? _____

Ministry leader: _____ Phone number: _____

Email: _____

Please answer the following questions

(All answers are confidential, please answer honestly)

1. Please describe how you came to the decision to make Jesus Lord of your life.

2. Please describe your present relationship with the Lord. (your prayer life, your struggles, etc.)

3. What areas of your life and character are you seeking to develop and improve?

4. Do you have any past criminal record, history with drugs or alcohol, or any history of abuse?

5. Please describe your involvement with your church. _____

6. Please describe your relationship with your family. _____

7. How does your family feel about your plans to do a DTS? _____

8. Is God leading you to a particular area of ministry? What are your God-given gifts or talents?

9. Please tell us other skills, strengths, and weaknesses you have. _____

10. How did God lead you to apply to do DTS at YWAM Madang? Why do you want to go into missions/ministry work? _____

Financial Information

We would like to give you the opportunity to have an international outreach. To join us on the international outreach, we highly recommend having your passport before the start of the school.

The international outreach will be more expensive, to include traveling costs. **Registration,**

Tuition & Outreach Fees:

Particulars	Amount
Registration fees (Non-Refundable)	K 50
Lecture Phase Fees	K 5,500
Outreach (OR) Fees PNG: K 2,500 International cost	K 6,000
Grand Total:	K 8,000 (PNG OR) or K 11,500 (International OR)

Please be informed that the lecture fee does not cover your Outreach fees and there will be additional fees and expenses for passports, NID Cards for Papua New Guinea citizens, if you do not have PNG passports and NID Cards already.

Do you have your lecture fees now? Yes/ No If No, how do you plan to raise the money needed for lecture and outreach fees? _____

Emergency Information

In the case of an emergency contact: _____ Relationship: _____

Address: _____ Phone number: _____

In case of emergency, I agree to the performance of such treatment, including anesthesia and surgery as the attending doctor, or physician may say is necessary.

Applicants Signature: _____ Date: _____

Parent/Guardian Signature _____ Date: _____

(if applicant is under 18)

Confidential Health Information

Please circle if you have ever had, or now have, any of the following:

Epilepsy, heart trouble, Mental Health (depression, anxiety, etc.), high blood pressure, Surgery, Diabetes, Hay Fever, Asthma, Back problems, Allergies, Hepatitis

If yes please explain _____

Do you have any physical disabilities we should be aware of? _____

Are you taking any medications or under a doctor's treatment at this time? _____

Do you have any food allergies? _____

Are you allergic to any medication? _____

Have you seen or are seeing a professional counselor for any issues? If yes, what issues? _____

Before enrollment into DTS, you must have a proper medical check-up and test for the following, accompanied by a medical report from a medical professional (doctor or nurse) You will also need a TB test (tuberculous test)

RELEASE OF LIABILITY

I release Youth With A Mission Inc., its staff, agents, and volunteer assistants from any liability whatsoever arising out of any injury, damage, sickness, death or loss, which may be sustained by said person during my involvement with Youth With A Mission Inc.

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

(if applicant is under 18 years)

Applicant - Fill in your details and sign. Then email your application to: Or you may drop it off at YWAM Madang, Kina Beach or **Email: info@ywammadang.com & WhatsApp: +675 7394 4580**

REFERENCE FORM – PASTOR

Applicant - Fill in your name and sign below. Then give it to your Pastor with an envelope addressed to:
YWAM MADANG, Madang Province 511, PNG or Email: info@ywammadang.com

Applicants Name: _____ Applicants Signature _____ Date _____

The above applicant has applied to do a Discipleship Training School with Youth With A Mission (YWAM) Madang. YWAM is an international, interdenominational Christian Mission Movement existing to know God and make Him known. We would appreciate you filling out the form to assist us in assessing his/her suitability for the school. Serious consideration will be given to your comments. It will be kept confidential. Thank you for your help. What is your relationship/role to the applicant? Senior Pastor / Youth Pastor / Mentor How well do you know the applicant? Very well / Well / Casually

How long have you known the applicant? _____

In your opinion, does the applicant know Jesus as their personal Lord and Saviour?

Do you believe the applicant has a call to missions?

Please comment on the applicant's family background

How does the applicant deal with relationships with the opposite sex?

What ministries has the applicant participated in at church?

What do you consider to be the applicant's strengths and weaknesses?

Would you recommend them as a student for YWAM MADANG? Yes /with reservation / No

Any other comments:

Please evaluate the Applicant's Character Based on this grading

0- not seen 1= Poor 2=Below Average 3=Average 4=Above Average 5=Excellent

Remarks	Grade	Comments	Remarks	Grade	Comments
Self Discipline			Teachable		
Flexibility			Financial Responsibility		
Commitment			Response to Authority		
Self-Confidence			Emotional Maturity		
Concern for others			Spiritual Maturity		
Willingness to serve			Judgement		
Communication Skills			Health		
Personal Appearance			Moral Standard		
Reliability			Respect by Peers		
Co-operation			Punctuality		

Ability to Lead			Work Ethic		
Leadership Skills			Initiative		

Any additional comments:

I declare that what I have written is accurate to the best of my knowledge.

Name _____ Signed _____

Position _____ Address _____

Email _____ Phone _____

Would you like more information about Youth With A Mission Madang? Yes or No

Please send completed reference to: ***The DTS Registrar***

MADANG, Madang Province 511, Papua New Guinea. Email: info@ywammadang.com

REFERENCE FORM – Friend or Employer

Applicant - Fill in your name and sign below. Then give it to your reference with a stamped envelope to: **YWAM Madang, Madang 511, Madang Province, PNG Email: info@ywammadang.com**

Applicants Name_____ Applicants Signature_____ Date_____

The above applicant has applied to do a Discipleship Training School with Youth With A Mission (YWAM) Madang. YWAM is an international interdenominational Christian Mission Movement existing to know God and make Him known. We would appreciate you filling out the form to assist us in assessing his/her suitability for the school. Serious consideration will be given to your comments and it will be kept confidential. Thank you for your help.

What is your relationship/role to the applicant? Employer / Friend / Mentor

How well do you know the applicant? Very well / well / casually

How long have you known the applicant?_____ How

does the applicant respond to correction? _____

In your opinion, is the applicant called to a career in missions or Christian service.

How does the applicant deal with relationships with the opposite sex.

Have you noticed smoking, chewing betel nut or alcohol use? If yes, which and how often?

Please comment on the applicant's family background.

In your opinion, what are the applicant's strengths and weaknesses

Any other comments:

Please evaluate the Applicant's Character Based on this grading

0- not seen 1= Poor 2=Below Average 3=Average 4=Above Average 5=Excellent

Remarks	Grade	Comments	Remarks	Grade	Comments
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Flexibility			Financial Responsibility		
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Any additional comments:

I declare that what I have written is accurate to the best of my knowledge.

Name _____ Signed _____

Position _____ Address _____

Email _____ Phone _____

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Please send completed reference to: ***The DTS Registrar***

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