



Please return completed form to:

The Registrar
 YWAM, Carlisle
 The Old Vicarage, West Walls,
 Carlisle CA3 8UF
 England
 Tel: +44 (0)1228 319058

Email: carlisedts@gmail.com
 Web: www.ywamcarlisle.com

- ❖ Please answer all the questions on this application form prayerfully and honestly.
- ❖ It will help us if you write your answers neatly in black ink.
- ❖ Married couples must complete separate application forms.
- ❖ If you need more space to answer a question, please use a separate piece of paper.

Documents to be completed / reviewed as part of application process		Includes...
1. APPLICATION FORM	SECTIONS: 1 - 6	1. Course Details 2. Personal Details inc Passport 3. Photo 4. Family 5. Education & Employment 6. Christian & Life Experience
2. SUPPLEMENTAL QUESTIONS	SECTIONS: A – F	A. Additional Questions B. Church C. Medical Care & Travel Insurance D. Finances E. Declarations
3. MEDICAL FORM		Self Declaration
4. REFERENCE FORMS	(i) Reference 1 - Pastor (ii) Reference 2 - Employer / Teacher (iii) Reference 3 - Friend	Please send these forms to your referees and ask them to send it to us by email (scanned document) or post. The referees should be mature Christians who have known you for at least two years or in the case of your employer/ teacher have observed you in a work / course capacity.
5. APPLICATION FEE	£25	See Supplemental Questions / Finances Section for payment details.

Once we receive the above documentation (1 – 4) and application fee from you, we will prayerfully review your application form and get back to you shortly. **We cannot give you a decision until we have all the reference forms, medical documentation and application fee.**

1 COURSE DETAILS

Course Applied For	
Start Date of Course (month / year)	

2 PERSONAL DETAIL

YOUR NAME

Family / Surname on passport		Title	
First Name on passport			
Middle Name(s)			
Preferred Name			
Former last name(s)			

PRESENT ADDRESS

City		Post/Zip Code	
State		Country	
Telephone (home)		(Work)	
Mobile		Fax	
Email			

Permanent Address (if different than present address above)

City		Post/Zip Code	
State		Country	

CONTACT DETAILS

Telephone (Home)		(Work)	
Mobile / Cell		Fax	
Email Address			

PERSONAL DETAILS

Date of Birth Day /Month /Year	
Place of birth	
Country of birth	
Nationality (for visa purposes)	

Gender (for accommodation purposes)	Male	Female
Marital Status (for accommodation purposes)		
EMERGENCY CONTACT INFORMATION		
Next of Kin / Contact's Name		
Relationship to you		
Address		
City	Post/Zip Code	
State	Country	
Telephone (Home)	(Work)	
Mobile / Cell	Fax	
Email Address		

PASSPORT DETAILS	
Full Name as listed on passport	
Passport Number	
Passport – city of issue	
Passport – country of issue	
Date of passport issued (dd/mm/yyyy)	
Date of passport expiry (dd/mm/yyyy)	
Have you ever been refused a visa for any country?	Yes No If Yes, please give details below

3 PHOTO

Please provide us with two passport size photos by email or post. This is NOT an essential part of the application process. If accepted, we will use your photo to create a photo board so that we can be praying for you and your course before you come and also know how to recognize you at the airport / train / bus station when you arrive.

**PLEASE
PROVIDE
2 PASSPORT
SIZE PHOTOS OR
SCAN AND SEND
THE PHOTO TO
US BY EMAIL**

4 FAMILY

SPOUSE INFORMATION

DTS APPLICANTS: We strongly recommend doing the DTS together as a couple / family.

Is your spouse accompanying you to Carlisle? Yes No

If no, please explain the reason.

Has your spouse/fiancé applied for the same school? Yes No

If no, please explain the reason.

Spouse's Family/Surname

Spouse's First Name

Spouse's Middle Name(s)

Birth date on Passport (dd/mm/yyyy)

Passport Number

Passport – City of issue

Passport – Country of issue

Date of passport issued (dd/mm/yyyy)

Date of passport expiry (dd/mm/yyyy)

Have you ever been refused a visa for any country? If Yes, please give details: Yes No

CHILDREN / DEPENDANT INFORMATION

Do you have any children coming with you? Yes No

If yes, please give their details below or add more children on additional paper:

Name (as Listed on Passport)	Gender M / F	Date of Birth (dd/mm/yy)	Place of Birth (City & Country)	Citizenship / Nationality	Passport Number	Date of Expiry (dd/mm/yy)

NANNY INFORMATION

If both you and your spouse are completing the DTS course together and have young children, please contact us as we may require you to bring a nanny / child carer with you and for them to complete an application form as part of your application process.

5 EDUCATION & EMPLOYMENT

WORK EXPERIENCE

Please list all career details for the last 10 years beginning with the most current or send us a copy of your current CV or Resume. (Please use a separate sheet of paper if necessary.)

Position	Company / Employer	Begin Date	End Date	Job Description or Main Responsibilities

Please summarise any of your personal skills, abilities or talents that you would like us to know about.

EDUCATIONAL EXPERIENCE

Please list highest level of education you have completed.

Secondary School (education between 11-16years) – including name of establishment, dates and qualification received

University / College / Higher or Further Education (post 16 years of age) – including name of establishment, dates and qualifications received

List any other training or qualifications you have received

YWAM / U of N EXPERIENCE

Are you pursuing a U of N (University of the Nations) Degree? Yes No

Have you previously attended a YWAM or U of N course? Yes No

Have you taken a course at this location in the last two years? Yes No

Course	Base location & country	Begin Date	End Date

Have you ever been staff within YWAM / U of N? Yes No			
Staff Position	Base location & country	Begin Date	End Date
Which languages do you speak, in order of fluency?			
1.	2.	3.	
How well do you speak English?	0 – No proficiency 1 – Elementary speaking 2 – Limited word proficiency 3 – Minimum professional proficiency	4 – Full professional proficiency 5 – Native speaking proficiency 6 – Language spoken at home	

6 CHRISTIAN & LIFE EXPERIENCE

1. Please describe your Christian conversion experience, the age you first entered into a meaningful relationship with the Lord and your present relationship with God.

2. What areas of your character are you presently seeking God on to further develop and improve? What would you recognise as your strengths?

3. What church, ministry and/or leadership experience have you had?

4. Do you believe you could live under "pioneer" situations: different food and culture, dormitory housing, or small quarters for families?

5. What are your goals and objectives for taking this course? Do you sense a calling from God into missions?

YWAM Statement of Faith



Youth With A Mission (YWAM) is an international movement of Christians from dedicated to presenting Jesus personally to this generation, to mobilizing as many as possible to help in this task, and to the training and equipping of believers for their part in fulfilling the Great Commission. As citizens of God's kingdom, we are called to love, worship, and obey our Lord, to love and serve His Body, the Church, and to present the whole gospel for the whole person throughout the whole world.

We of Youth With A Mission believe that the Bible is God's inspired and authoritative word, revealing that Jesus Christ is God's son; that people are created in God's image; that He created us to have eternal life through Jesus Christ; that although all people have sinned and come short of God's glory, God has made salvation possible through the death on the cross and resurrection of Jesus Christ; that repentance, faith, love and obedience are fitting responses to God's initiative of grace towards us; that God desires all people to be saved and to come to the knowledge of the truth; and that the Holy Spirit's power is demonstrated in and through us for the accomplishment of Christ's last commandment, "...Go into all the world and preach the gospel to every creature" (Mark 16:15).