



**Please staple  
wallet-size  
photo here.**

# VOLUNTEER APPLICATION

Please fill out application form (answer all applicable questions) and return to the address above or email it to (Personnel@YWAMTyler.org) along with a recent, wallet-size photo. Husbands and wives should complete separate applications. Give one reference form to your pastor/elder and one to your YWAM DTS/CDTS/SOE leader, base leader, current YWAM supervisor, or current employer. Provide both references with a stamped envelope addressed to the details above.

## SECTION A: General Information

(Please print or type and use a separate sheet of paper when necessary.)

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

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State/Province Zip Country

Email \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_

Passport # \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Type/Class \_\_\_\_\_

Please attach photocopy of driver's license

Marital Status:  Single  Engaged  Married  Widowed  Separated  Divorced

List full name, age, schooling grade level, and sex of children accompanying you \_\_\_\_\_

Date you wish to volunteer \_\_\_\_\_ Length of time you can volunteer \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Name Relationship Phone #

Address \_\_\_\_\_  
Street City State/Province Zip Country

## SECTION B: Church Information

Home Church \_\_\_\_\_ How long have you attended? \_\_\_\_\_

Church Address \_\_\_\_\_ Church denomination \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Church Phone ( ) \_\_\_\_\_

## SECTION C: Christian Life/Ministry/Work

1. Describe your present relationship and devotional life with the Lord:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. How did you first come into contact with YWAM?

\_\_\_\_\_  
 \_\_\_\_\_

3. Who or what influenced you to apply to YWAM Tyler?

\_\_\_\_\_  
 \_\_\_\_\_

## SECTION C: Cont'd

4. What do you think are your gifts and callings?

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5. What expectations do you have about serving at YWAM Tyler?

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## SECTION D: Experience and Education

Have you previously attended a YWAM school, been on Staff, or volunteered?  Yes  No

If yes, Describe \_\_\_\_\_

Describe any other ministry experience (use separate sheet if necessary)

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## SECTION E: Health Information

Do you have any physical handicaps, health conditions, or dietary needs requiring special attention? (Explain) \_\_\_\_\_

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Are you under a doctor's care or taking medications?  Yes  No If yes, please explain \_\_\_\_\_

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Have you ever had psychiatric treatment?  Yes  No If yes, please explain \_\_\_\_\_

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Do you have medical insurance?  Yes  No If yes, please supply the following information:

Name of Insurer \_\_\_\_\_

Medical Insurance \_\_\_\_\_

What does the insurance cover? \_\_\_\_\_

## CONSENT FOR TREATMENT

I hereby agree to the performance of such treatment, anesthetics, and operations as in the opinion of the attending physician are deemed necessary.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/ Guardian Signature (for applicants under 18)

\_\_\_\_\_  
Date Relationship to applicant

## RELEASE OF LIABILITY

I/ we hereby release YOUTH WITH A MISSION, INC., its agents, employees, and volunteer assistants from any liability whatsoever arising out of any injury, damage, or loss which may be sustained by said person during the course of involvement with YOUTH WITH A MISSION, INC. I/ we agree to resolve any and all disputes with YOUTH WITH A MISSION, YWAM Directors, or staff by means of reconciliation or mediation and waive any rights to pursue action by way of litigation.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/ Guardian Signature (for applicants under 18)

\_\_\_\_\_  
Date Relationship to applicant

I certify that all information in this application is complete and accurate. If accepted by Youth With A Mission, I will abide by the spirit, rules, and schedule of the volunteer program. I understand that any and all Confidential Evaluations in my file are YWAM property, and I relinquish the right to view them or obtain information from them in any way. In accordance with biblical principles, I agree to resolve any and all disputes with Youth With A Mission, its directors or staff by means of reconciliation or mediation and waive any right to pursue action by way of litigation.

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

# VOLUNTEER SKILLS LIST

Name \_\_\_\_\_ Date \_\_\_\_\_

Please indicate your experemce by checking the box on the left and your skill level by entering the following letters in the brackets:

S for Skilled

I for Interested

If you have no experience but are willing to help, enter ""H" in the brackets. Explain if necessary.

## Construction/Maintenance/Operator

- Plumbing [ ] \_\_\_\_\_
- Carpentry (finish or rough?) [ ] \_\_\_\_\_
- Electrical (commercial or simple?) [ ] \_\_\_\_\_
- Mechanics (auto or diesel?) [ ] \_\_\_\_\_
- Appliance Repair [ ] \_\_\_\_\_
- Cabinetry [ ] \_\_\_\_\_
- Concrete (flat or structural?) [ ] \_\_\_\_\_
- Framing (steel or wood?) [ ] \_\_\_\_\_
- Gardening [ ] \_\_\_\_\_
- General Laboring [ ] \_\_\_\_\_
- Heavy Equipment (specify) [ ] \_\_\_\_\_
- Heating/AC Repair [ ] \_\_\_\_\_
- Insulating [ ] \_\_\_\_\_
- Masonry [ ] \_\_\_\_\_
- Landscaping [ ] \_\_\_\_\_
- Painting [ ] \_\_\_\_\_
- Rebar [ ] \_\_\_\_\_
- Sheet Rocking (install or mud?) [ ] \_\_\_\_\_
- Flooring (carpet or linoleum?) [ ] \_\_\_\_\_
- Ceramic Tiling [ ] \_\_\_\_\_
- Welding (electrical or acetylene?) [ ] \_\_\_\_\_
- Roofing (metal, shingles, or tile?) [ ] \_\_\_\_\_
- Sewerage [ ] \_\_\_\_\_
- Other [ ] \_\_\_\_\_

## Serving

- Childcare [ ] \_\_\_\_\_
- Food Service [ ] \_\_\_\_\_
- Cooking [ ] \_\_\_\_\_
- Sewing [ ] \_\_\_\_\_
- Housekeeping [ ] \_\_\_\_\_
- Teaching [ ] \_\_\_\_\_
- Teaching English [ ] \_\_\_\_\_
- Other [ ] \_\_\_\_\_

## Communications

- Graphic Design [ ] \_\_\_\_\_
- Web Design [ ] \_\_\_\_\_
- Writing [ ] \_\_\_\_\_
- Video [ ] \_\_\_\_\_
- Video Editing [ ] \_\_\_\_\_
- Photography [ ] \_\_\_\_\_
- Photographic Editing [ ] \_\_\_\_\_
- Other [ ] \_\_\_\_\_

## Administration/Logistical

- Data Entry [ ] \_\_\_\_\_
- Receptionist [ ] \_\_\_\_\_
- Typing/Filing/Clerical/General Office [ ] \_\_\_\_\_
- Organization [ ] \_\_\_\_\_
- Other [ ] \_\_\_\_\_

**Other skills not listed** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Tools I can bring** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Please return form to

Ywam Tyler • Administration Department • P.O. Box 3000 • Garden Valley, TX 75771-3000  
(903) 509-5321 • fax (903) 882-7673 • ywamtyler.org

# CONFIDENTIAL REFERENCE

## For Volunteer Position

### TO THE APPLICANT

Give this form to the person filing the reference along with a stamped envelope addressed to: YWAM • ATTN: Administration  
P.O. Box 3000 • Garden Valley, TX 75771. This evaluation is confidential and will not be shown to you.

Name of Applicant \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_  
 Dates Available \_\_\_\_\_

### TO THE PERSON FILLING OUT THIS FORM

The above applicant has applied for a volunteer position sponsored by Youth With A Mission in Tyler, Texas. YWAM, founded in 1960, is an international, interdenominational Christian missionary organization. Serious consideration will be given to your comments, so we greatly appreciate your careful and thoughtful completion of this form. All evaluations are kept in strict confidence and will not be shown to the applicant. Your early response (within seven days) is most appreciated. Thank you for your assistance.

What is your relationship to the applicant?  Employer  Teacher  Pastor  Friend  
 Past YWAM leader  Other \_\_\_\_\_

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

How long have you known the applicant? \_\_\_\_\_ years \_\_\_\_\_ months

Please check the following and comment as necessary:

	SUPERIOR	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	INFERIOR
Self-confidence					
Ability to make decisions					
Social poise					
Concern for others					
Ability to follow					
Leadership					
Ability to receive correction					
Willingness to serve					
Emotional stability					
Communication skills					
Health					
Personal hygiene					

Comments \_\_\_\_\_

- |                          |                                                 |                                  |                                                |
|--------------------------|-------------------------------------------------|----------------------------------|------------------------------------------------|
| Mental ability           | <input type="checkbox"/> Quick to comprehend    | <input type="checkbox"/> Average | <input type="checkbox"/> Slow                  |
| Industry                 | <input type="checkbox"/> Hard worker            | <input type="checkbox"/> Average | <input type="checkbox"/> Lacks persistence     |
| Reliability              | <input type="checkbox"/> Meets obligations      | <input type="checkbox"/> Average | <input type="checkbox"/> Neglects obligations  |
| Teamwork                 | <input type="checkbox"/> Works well with others | <input type="checkbox"/> Average | <input type="checkbox"/> Often causes friction |
| Flexibility              | <input type="checkbox"/> Open to change         | <input type="checkbox"/> Average | <input type="checkbox"/> Unyielding            |
| Christian character      | <input type="checkbox"/> Well-balanced          | <input type="checkbox"/> Average | <input type="checkbox"/> Unstable              |
| Disposition              | <input type="checkbox"/> Cheerful               | <input type="checkbox"/> Average | <input type="checkbox"/> Passive               |
| Punctuality              | <input type="checkbox"/> Punctual               | <input type="checkbox"/> Average | <input type="checkbox"/> Often late            |
| Financial responsibility | <input type="checkbox"/> Honors obligations     | <input type="checkbox"/> Average | <input type="checkbox"/> Neglectful            |

1. Which of the following would best describe the applicant's Christian experience?  
 Mature     Contagious     Genuine and growing     Over-emotional     Superficial  
Comments \_\_\_\_\_
  
2. With reference to Christian service, is applicant \_\_\_\_\_  
 Dedicated     Average     Casual  
Comments \_\_\_\_\_
  
3. Does he/she display high moral standards?     Yes     No    Explain \_\_\_\_\_  
\_\_\_\_\_
  
4. What do you believe are the applicant's motives in applying for this position?  
 Christian service     Desire to spread the Gospel     Receive help/ministry     Desire to help others  
 Escape an unpleasant home situation  
 Other \_\_\_\_\_  
\_\_\_\_\_
  
5. Please comment on the applicant's family background \_\_\_\_\_  
\_\_\_\_\_
  
6. What do you consider to be the applicant's strong points? (include special abilities) \_\_\_\_\_  
\_\_\_\_\_
  
7. Please add any other pertinent remarks (e.g. medical, psychological, drug or alcohol abuse, criminal record, homosexual, occultic practices, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
8. What could YWAM do to aid the applicant's personal development? \_\_\_\_\_  
\_\_\_\_\_
  
9. (Pastors only) Does your congregation/group stand behind the applicant with enthusiasm and prayer? \_\_\_\_\_  
\_\_\_\_\_
  
10. Would you recommend the applicant for acceptance to this position?  
 Yes     With some reservations (explain)     No (explain) \_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Name (please print) \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_



**Return form to:**  
**YWAM Tyler**  
**ATTN: Administration**  
**P.O. Box 3000**  
**Garden Valley, TX 75771**  
**(903) 882-5591 • FAX (903) 882-7673**