



ABOUT ME

Name: Last First Middle Former

Mailing Address: Number & Street City/State/Zip Country Phone

Permanent Address: Number & Street City/State/Zip Country Phone

Date of Birth (m/d/y) Birthplace (City, State) Country of Citizenship U.S. Immigration Status

Name of Parents or Guardian Mailing Address Phone

E-mail Address

CHURCH AFFILIATION

What church do you attend? _____

Church Mailing Address: _____

Are you a member? Yes No

How long have you regularly attended?

Denomination/Conference: _____

Pastor's Name: _____

Directions: Please complete this application as thoroughly and honestly as you are able. We realize everyone is a work in progress, but we do want to ensure that you are equipped to face the unique challenges of Church Plant Assistant ministry. If you run out of space answering any of the below questions, please write on the back of the page.

1) Please describe your most influential ministry training experiences.

2) Describe the people who have served as your primary spiritual mentors (Names, Positions, and Influences)

3) Please list your past work experiences and include the following details. (If you have a resume, please attach that.)

Employer, Location, Length of Time, Job Description, Overall Impression of the Job: (*was it a positive or negative experience, and why*), Name and Contact Info of Employer.

4) Please describe your devotional life. When do you have devotions? How much time each day? Do you use a devotional guide, and if so, which one? What is your greatest devotional struggle? What had God been teaching you lately in Bible Study?

5) In the space below, summarize your personal testimony, your major times of spiritual growth and your call to train further in ministry. What are your major motives and expectations for pursuing an internship in an AFLC home mission church? What do you think might be your greatest challenges as a Church Plant Assistant?

6) Please list two character references: Include name, phone number, how long you have known them, and in what capacity.

Two spiritual references (Name /Address/Phone/ Email):

- 1. _____
- 2. _____

EDUCATIONAL BACKGROUND

List high school credentials and any other colleges or universities you have attended.

High School: _____ Graduation Date: _____

Bible School, College or University	Dates Attended	Degrees or Credits
1. _____	From _____ To _____	_____
2. _____	From _____ To _____	_____
3. _____	From _____ To _____	_____

If you have not yet finished your college degree, would you like to continue to do so? Yes No

If you are a former AFLBS/FLBC student, does Home Missions have your permission to request your school records and interview past teachers? Yes No

LIFE AND WITNESS

- Are you currently a member in good standing with your local congregation? Yes No
- How would you rate your relationship with your pastor (5 being highest) 1 2 3 4 5
- Have you ever been suspended from school, church, or college? Yes No
- Do you have any financial debt? If so, how much? _____ Yes No
- Have you ever been charged with any crime involving sexual misconduct? Yes No
- Have you ever been convicted in court of any crime involving sexual misconduct? Yes No
- Within the past 2 years, have you used alcoholic beverages? Yes No
- Within the past 2 years, have you used tobacco? Yes No
- Within the past 2 years, have you used illegal drugs? Yes No

- Have you been judged guilty of criminal or civil offenses? Yes No
- Have you ever struggled with depression? Yes No
- Have you been viewing inappropriate media? Yes No
- Does your lifestyle reflect a commitment to personal purity?
(This mean freedom from pornography use and sexual impurity) Yes No
- How would you rate your relationship with your parents (5 being highest) 1 2 3 4 5
- Are you currently involved in any romantic relationship? Yes No
- If so, for how long? _____
- Do you have your parent’s blessings for being in this relationship? Yes No
- Do you have your parent’s blessing to consider Church Plant Assistant ministry? Yes No
- If accepted as a Church Plant Assistant, are you willing to follow the spiritual leadership
of the AFLC Home Missions director, pastor and board under which you serve? Yes No

What would you say are your greatest strengths?

What would you say are your greatest weaknesses?

Please list any considerations not already mentioned that you think might impact your role as a Church Plant Assistant.

Hobbies/Interests:

Are there any significant medical issues we should be aware of? Are you taking any ongoing prescription medicine?

DETAILS ABOUT THE INTERNSHIP

I would like to find my own housing in the community: ____

I am interested in lodging with a family from the church: ____.

I am willing to live with a roommate. Yes No If possible, I prefer to live alone. Yes No

I am willing to abide by the family and church guidelines while I am enrolled in the internship program. Yes No

Will you have a car? Yes No If yes, year/make/model:

APPLICATION STATEMENT

My signature below indicates that all information in this application is honestly presented, factually correct and complete. I understand that failure to submit truthful and open answers may result in the denial of this application or my subsequent dismissal from the Program. As a Church Plant Assistant with AFLC Home Missions, I will seek to live the Christian life in accordance with accepted practices and above all to be pleasing to the Lord Jesus Christ.

DATE _____ SIGNATURE _____

SEND THIS APPLICATION TO:

Mail to:

AFLC Home Missions,
3110 E. Medicine Lake Blvd.
Plymouth, MN 55441

Or

Email to:

homemis@afcl.org