



## STAFF APPLICATION

(Mr.) (Mrs.) (Miss) \_\_\_\_\_  
(Last/Surname) (First) (Middle) (Preferred)

Home Address \_\_\_\_\_

Present Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

I wish to join YWAM Shanti as a staff beginning (date) \_\_\_\_\_

Passport Number \_\_\_\_\_ Date of Expiry \_\_\_\_\_

Place of Issue \_\_\_\_\_

Birthday \_\_\_\_\_ Place of Birth \_\_\_\_\_ Age \_\_\_\_\_

Languages Spoken \_\_\_\_\_

Musical ability or other talents \_\_\_\_\_

Occupational & Professional skills \_\_\_\_\_

Do you have insurance? \_\_\_\_ (Yes/No) Insurance Type \_\_\_\_\_

Insurance details \_\_\_\_\_

Marital Status: Single \_\_\_\_ Married \_\_\_\_ Separated \_\_\_\_ Divorced \_\_\_\_

Engaged \_\_\_\_ Widowed \_\_\_\_

Name of Spouse/Fiancé \_\_\_\_\_

How long have you been married? \_\_\_\_\_

Children accompanying you: Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Day/Month/Year \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Day/Month/Year \_\_\_\_\_

In case of emergency, contact \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

### EDUCATIONAL HISTORY

Secondary/High School name \_\_\_\_\_

Date of graduation \_\_\_\_\_

College/University \_\_\_\_\_ Major/Degree \_\_\_\_\_

Date of graduation \_\_\_\_\_

Date and Place of DTS: \_\_\_\_\_

Any other YWAM schools/programs? (List dates and places)

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Have you ever been on staff with YWAM? (List dates and places)

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Sending Church: \_\_\_\_\_

Address: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Phone Number & Email: \_\_\_\_\_

What has lead you to apply for staff at YWAM Shanti? List specific details that contributed to your confirmation to be on staff at YWAM Shanti (words, scriptures, pictures, confirmations, prayers etc.).

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What gifts or ways of serving do you see yourself contributing to YWAM Shanti as staff?

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Spiritual Testimony:

- A) How did come to receive Jesus as your personal Lord and Savior?
- B) What is your relationship with God now?
- C) What struggles are you working through? (i.e., emotional, physical, spiritual, etc.)

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List the names and email/phone numbers of the three individuals filling out your reference forms. (One must be your Pastor/Spiritual leader/YWAM base leader, one must be your DTS/Outreach leader, the other must be a friend who knows you well.)

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Please email a complete application to [info@ywamshantihk.org](mailto:info@ywamshantihk.org), we will contact you once we receive it. Thank you!

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Signature and Date