

[Guide to Completing Staff Application]

☐ Before you begin

We urge you to take the first and most important step of seeking God's guidance through prayer, Bible study and counsel from your pastor, mature Christian friends and family, before considering any type of involvement in ministry of BRIDGE International.

☐ The Application Process

You can apply for a staff position at any time during your DTS/CDTS, or after your outreach is completed. When the required items listed below have been received, BRIDGE International Leadership will prayerfully consider your application. Final decisions will not be made until your DTS/CDTS and outreach have been successfully completed. **Expect the application process to take at least four weeks.** (depending on when we receive your Reference Forms)

☐ Application Form

Please type or print clearly with black or dark blue ink so copies can be made. Use a separate sheet of paper when needed. All the questions on the application must be filled in if the question does not apply to you write N/A(Not Applicable). Husbands and wives must submit separate application and reference forms.

☐ Photograph

Please make sure to attach a small photo of yourself to the upper right hand corner of the application.

☐ Reference Forms

For applicants who have no previous YWAM staff experience,

- YWAM DTS Leader Reference.
- Pastor's Reference.

For applicants who have previous YWAM staff experience,

- YWAM leader Reference(previous ministry)
- Pastor's Reference.

These forms are kept confidential. **The person filling out the reference form needs to mail it directly to BRIDGE International.**

☐ Staff Positions

Below are the staff categories at YWAM BRIDGE International :

Full Time Staff (FTS): Individuals called by God who have chosen to dedicate themselves to the purposes and goals of YWAM. FTS are those who have committed to volunteer their labor, time and talents full-time to the Mission and Vision of YWAM. Long-Term meaning two or more years, full time meaning 40 plus hours per week.

Associated Staff (AS) : Individuals called by God who have chosen to dedicate themselves to the purposes and goals of YWAM. As are those who have committed to volunteer their labor, time and talents part-time to the Mission and Vision of YWAM. They are unable to commit to two years and can work less than 40 hours per week but not less than 15 hours per week.

Be sure to mark the box that applies to you on the first page of the Application.

☐ **YWAM Statement of Time Commitment**

The YWAM Staff Covenant is the covenant signed by all YWAM staff agreeing to adhere to the spirit and rules of conduct, and volunteer services at YWAM.

Please send the signed form in with your application.

This form will be given to you when you arrive and must be signed by both and the leader of your area.

☐ **Financial Support**

As is our policy throughout YWAM, staff members are responsible for trusting God for their own financial needs. We recognize the importance of being sent out with the blessing of a home church, secure in knowing that you have a firm foundation of prayer and financial support.

☐ **Staff Insurance**

All staff must have a proof of insurance attached to the Application.

☐ **Centre housing Application (If applicable)**

Centre housing is allocated at the beginning and end of each school quarter.

Centre housing is very limited. We cannot promise that you will have a room or bed.

If you have questions, contact BRIDGE International.

☐ **The Last Step..**

We will notify you as soon as possible concerning the outcome of your application.

Please DO NOT book your ticket until you have heard whether by email or phone from BRIDGE International that you have been accepted.

If you have any questions, please contact us at the informations below.



YWAM BRIDGE International : PO Box 7, Mitchell, 2911, ACT, Australia

Tel : +61 (0)2 6241 5500

Internet Phone : **myLG** 070 8245 0702

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Web-site : www.ywambridge.org

Staff Application

Photo
(3.5 X 4.5 cm)

BRIDGE International, Youth With A Mission

I am applying for :

- **Full Time Staff** (2 years or more)
- **Associate Staff** (3 months/ less than 2 years)

What length of service at BRIDGE International do you intend to commit to? (Months/Years)

Desired date of arrival (If Application is accepted):

What specific area's are you most interested in?

Have you been in contact with anyone in YWAM/ BRIDGE International regarding this interest?
 Yes_____ No_____ If yes, whom? _____

Personal Information

Name: First_____ Middle_____ Last_____ ☐ Male ☐ Female

Date of Birth (day/mo/yr)_____ Nationality_____

Present Address_____

Telephone_____ E-mail_____

Passport Name_____ Passport Number_____

Place of Issuance_____ Issued Date_____ Expiration Date_____

Family Information

Relation	Name	Male, Female	Date of Birth (day/mo/yr)	School Grade
Spouse				
Children				
Children				
Children				
Children				

Educational History

Institution	Location	Degree/ Major	Date (mo/yr)

Work Experience

Company	Position	Date (day/mo/yr)	Skills Used

Musical or other talents _____

When and where did you attend your DTS lecture phase and outreach?

DTS	Location	Date (day/mo/yr)	Note
Lecture phase			
Outreach phase			

List YWAM/ YofN schools you have completed.

The name of school	Location	Date (day/mo/yr)	Note

List most recent YWAM staff positions, your involvement, location, leader, date. (If applicable)

Staff position/ Involvement	Location	Date (day/mo/yr)	Leader

Language (Mother tongue) _____

English Level ☐ Native Speaking Proficiency ☐ Minimum Professional Proficiency
 ☐ Limited Word Proficiency ☐ Elementary Speaking

Other Language _____

☐ Native Speaking Proficiency ☐ Minimum Professional Proficiency
☐ Limited Word Proficiency ☐ Elementary Speaking

Church Information

Church Name _____ Denomination Affiliation _____

Pastor's Name _____ Telephone _____

Address _____

Describe your involvement with the local church. _____

In case of emergency: contact information

Name _____ Relationship _____ Telephone _____

Address _____ E-mail _____

Do you or members of your family have any limitations(i.e. physical or mental) that might influence a placement decision? ☐ No ☐ Yes If yes please explain _____

Do you or member of your family have any illness of physical impairment that would put other at risk? ☐ No ☐ Yes If yes please explain _____

For the record

Are there any issues, traumas, situations which may affect your calling and commitment to YWAM BRIDGE International (current/ pending legal proceedings, domestic/ family matters, divorce, deaths and separation)? ☐ No ☐ Yes

If yes, please explain: _____

Financial Information

Do you have the financial support base to enable you to fulfill your intended commitment to YWAM BRIDGE International? ☐ Yes ☐ No

If not, how much more monthly support do you need to raise? _____

Do you need the information on how to raise your support? ☐ Yes ☐ No

I confirm that I am fully aware of my financial obligations, both to the Lord and to YWAM BRIDGE International. I therefore accept all responsibility for my staff fees and personal expenses incurred during my involvement with Youth With A Mission.

Signature _____ Date _____

Medical Insurance Policy

Company _____ Expiration Date _____

Policy # _____

We require all staffs and students to hold medical insurance during their involvement with YWAM BRIDGE International. We highly recommend an internationally recognized travel insurance policy.

Reference Form

Name	Relationship	Telephone	E-mail

I certify that all the information in this application is complete and accurate.

Date (day/mo/yr) _____

Applicant's Name _____

Applicant's Signature _____



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Statement of Commitment

All Staff and Associate Staff

"LORD, who may dwell in your sanctuary? Who may live on your holy hill?
who despises a vile man but honors those who fear the LORD, who keeps his oath even when it hurts."
(Psalm 15:1, 4)

1. As a co-worker for God, I will freely and voluntarily dedicate my labors and talents to the BRIDGE International' effort to mobilize, equip, and release 21st century missionaries, empowered by the Holy Spirit, to walk out the Great Commandment and obey the Great Commission.
2. I have sought God's guidance through prayer and counsel and will abide by the spirit and rules of the BRIDGE International. I promise to comply with all of the policies and rules of conduct that apply to me while serving here.
3. I agree that the call of God upon me as a volunteer carries with it the assumption that God will provide the financial support I need to meet all financial obligations to BRIDGE International. I understand that I must secure contributions or provide support from my own resources sufficient to cover my .
4. If I am unable to meet my financial obligations, I will comply with BRIDGE International guidelines, procedures and policies that concern past due. housing an tuition fees and take necessary actions to eliminate debt and keep housing fee payments current.
5. I recognize that I have the responsibility to relate to my fellow workers with mutual love, respect, accountability, and care. As a volunteer member of a larger international family of Youth With A Mission, I will seek to live by biblical standards and promote YWAM Foundational Values.
6. I will hold myself accountable to BRIDGE International leadership and biblical standards of moral conduct. I agree that any verified moral violation will be considered grounds for disciplinary action. I will conduct myself in the local community as an ambassador of Jesus Christ and will represent Him in love and holiness.

I have read this Statement of Commitment. I understand and agree to its terms:

Date (day/mo/yr) _____

Applicant's Name _____

Applicant's Signature _____



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YWAM BRIDGE International

Confidential Health Form

Please complete the following questions as thoroughly as possible. You do not need a physician's signature for this form. Must attach a chest X-ray results to check the transferable diseases(i.e. Tuberculosis, Hepatitis)

Name of Applicant _____ **Sex :** ☐ Male ☐ Female **Blood type** _____
Height _____ Cm **Weight** _____ Kg **Sight :** **Left** _____ **Right** _____

Have you ever had, or do you have, any of the following?

	No	Yes		No	Yes		No	Yes
Skin Conditions			Heart trouble			Jaundice		
Eye trouble			High blood pressure			Chronic constipation		
Ear trouble			Low blood pressure			Intestinal trouble		
Head injury			Rheumatism			Recurrent diarrhoea		
Recurrent headache			Back Problem			Diabetes		
Paralysis			Arthritis			Kidney Disease		
Mental disorder			Dislocation of joint			Anemia		
Weakness			Kidney Disease			Venereal Disease		
Insomnia			urethritis			Tumour/ Cancer		
Depression			Gall bladder problems					
Shortness of breath								
Asthma			Appendectomy			Irregular periods		
Epilepsy			Intestinal trouble			Severe cramps		
Allergy			Tonsillectomy			Excessive flow		
						Are you pregnant?		

If you have Yes on the list, please describe _____

If Yes in any below, please specify.

1. Do you have other illness of conditions? ☐ No ☐ Yes
 (Specify) _____

2. Are you at present under the doctor's care of any condition? ☐ No ☐ Yes
 (Specify) _____

3. Are you taking any medication at this time? ☐ No ☐ Yes
 (Specify) _____

4. Are you allergic to any drugs/ medications? ☐ No ☐ Yes

(Specify) _____

5. Are you now receiving or did you ever receive compensation for disability from any resource? ☐ No ☐ Yes

(Specify) _____

6. Have you had, past or present, psychiatric care or counselling? ☐ No ☐ Yes

(Specify) _____

7. Do you have any physical impairments, handicaps, or health conditions which require special attention?

☐ No ☐ Yes (Specify) _____

8. Have you ever had any of the following Communicable Diseases?

☐ Chicken Pox ☐ Measles (Rubella) ☐ Measles (Rubeola) ☐ Mumps

☐ Pertussis ☐ Scarlet Fever ☐ Tuberculosis ☐ AIDS/HIV

☐ Other (Specify) _____

9. If Yes in any above, please specify.

(Specify) _____

10. Have any of your relatives ever had any of the following?

☐ Tuberculosis ☐ Diabetes ☐ Kidney Disease ☐ Heart Disease ☐ Hypertension

☐ Arthritis ☐ Asthma ☐ Stomach Disease ☐ Epilepsy ☐ Cancer

11. If Yes in any above, please specify the relationship and describe it.

(Specify) _____

I certify that all the information in this health form is complete and accurate.

Date (day/mo/yr) _____

Applicant's Name _____

Applicant's Signature _____



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YWAM BRIDGE International

Confidential Reference Form

Please fill in your information on this form, sign it and give it, with a stamped envelope, to your recommender. The recommender is able to send an E-mail directly to info@ywambridge.org by yourself.

Name of Applicant _____

Date (day/mo/yr) _____ **Signature** _____

The above applicant has applied to volunteer as a staff member at the BRIDGE International, Youth With A Mission. Serious consideration will be given to your comments. Therefore, we ask that you complete this reference form carefully. This information will be treated confidentially.

What is your relationship to the applicant? : ☐ Pastor ☐ DTS leader ☐ Previous YWAM leader

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

Could you check on any or all of the following areas.

	Superior	Above average	Average	Below average	Inferior
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment/ Decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____

Could you check on any or all of the following areas.

Academic capacity	<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
Cooperativeness	<input type="checkbox"/> Works well with others	<input type="checkbox"/> Average	<input type="checkbox"/> Avoids group activity
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

Comments _____

1. Does he/she display high moral standards? ☐ Yes ☐ No (If No, please explain)

2. Is he/she prejudiced against groups, races or nationalities? ☐ Yes ☐ No (If Yes, please explain)

3. Is he/she committed to Christ? ☐ Dedicated ☐ Average ☐ Casual

(Comments) _____

4. In your consideration, which of the following would best describe the applicant's Christian experience?

☐ Mature ☐ Contagious ☐ Genuine and Growing ☐ Over-emotional ☐ Superficial

(Comments) _____

5. Overall, what do you consider to be the applicant's strong point? (Include special abilities)

6. Please comment on the application background. (if known)

7. In your opinion, what are the applicant's motives for applying to the BRIDGE International?

8. What could the BRIDGE International do to aid in the applicant's personal development?

9. Please add any other relevant remarks (i.e. medical, psychological, drugs, alcohol or other areas or their life we should know more about, to be of service to them.

10. Would you recommend the applicant for acceptance into the BRIDGE International?

I have known _____ for _____ years, and believe that he/she possesses the indicated above.

Date(day/mo/yr) _____ Name _____ Signature _____

Phone _____ E-mail _____ @ _____

Address _____



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Ability to follow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgment/ Decision-making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____

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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

Comments _____

1. Does he/she display high moral standards? ☐ Yes ☐ No (If No, please explain)

2. Is he/she prejudiced against groups, races or nationalities? ☐ Yes ☐ No (If Yes, please explain)

3. Is he/she committed to Christ? ☐ Dedicated ☐ Average ☐ Casual

(Comments) _____

4. In your consideration, which of the following would best describe the applicant's Christian experience?

☐ Mature ☐ Contagious ☐ Genuine and Growing ☐ Over-emotional ☐ Superficial

(Comments) _____

5. Overall, what do you consider to be the applicant's strong point? (Include special abilities)

6. Please comment on the application background. (if known)

7. In your opinion, what are the applicant's motives for applying to the BRIDGE International?

8. What could the BRIDGE International do to aid in the applicant's personal development?

9. Please add any other relevant remarks (i.e. medical, psychological, drugs, alcohol or other areas or their life we should know more about, to be of service to them.

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I have known _____ for _____ years, and believe that he/she possesses the indicated above.

Date(day/mo/yr) _____ Name _____ Signature _____

Phone _____ E-mail _____ @ _____

Address _____



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Personal Call to Mission

Please prayerfully consider and answer the following questions. If necessary, use a separate piece of paper.

1. What region(s) spheres & society of the world do you feel most drawn to in terms of personal ministry focus?

2. What influenced you to apply for Staff of YWAM BRIDGE International?

3. What are your hopes and expectations for serving at YWAM BRIDGE International ?

4. What can you offer the YWAM BRIDGE International ? What do you want to receive?

5. Define in your own words what a commitment to YWAM BRIDGE International means to you?

6. As you invest in YWAM BRIDGE International we want to invest in you. Therefore we are offering many opportunities for staff and leadership training(some of which are required). What are your thoughts on that?

7. What are your long-term ministry goals?

8. What would you do if not accepted?



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