



Internship Application Form

Personal Info



Full Name: _____

Street or Box _____

City _____ State / Province _____

Postal Code / Zip _____ Country _____

Contact Phone Number: (Home) _____ (Cell) _____

Email Address _____

Date of Birth:(participants must be between the ages of 19-39) _____

Ethnicity: _____ Gender: Male / Female

Occupation / Education

School: _____ Currently Enrolled? Yes / No Year: _____

Major: _____

Degree Earned (if applicable): _____ Will this internship be for school credit? Yes / No

Place of Employment: _____

Occupation: _____ Time in current job: _____

Supervisors Name: _____ Phone: _____



Church Info

Briefly describe the church with which you are most actively involved. If you have no church, please explain why.

Church Name: _____ Phone: _____

Pastor's Name: _____

Are there any specific Christian denominations or worship styles that make you feel uncomfortable? If so, please explain.

Background Info

Do you have or have you had any significant physical conditions or special limitations (climate, diet, exercise, stamina, eating disorder, depression, prescription medication)? If yes, please explain (when? For how long? Is this a current condition? If not, when did it end?). Also include the name and phone number of your attending physician.

Have you ever seen a counselor or therapist for any reason (including addiction)? If yes, for what and how long? If currently in counseling, please include a reference letter from your counselor. Regardless of counseling, have you ever suffered any type of abuse? If so, when? How have you dealt with/been dealing with it?

Have you ever had an arrest for any violation that resulted in a conviction, a plea of guilty or no contest, probation, community service, a summary report, or some other form of adjudication (other than a minor traffic violation)? Also, do you have any pending charges or are you under any type of legal investigation? *If yes, please explain on a separate sheet of paper.*

No Yes

Have you ever been accused of any kind of abusive behavior? If so, when, by who, and for what?
If yes, please explain on a separate sheet

No Yes



Self Evaluation

Rate yourself in the following areas on a scale of 1 (lowest) to 5 (highest)

Sense of humor	1	2	3	4	5
Self-confidence	1	2	3	4	5
Humility	1	2	3	4	5
Sensitivity to others	1	2	3	4	5
Tolerance of Christians who practice faith differently	1	2	3	4	5
Motivation to serve people in need	1	2	3	4	5
Ability to work hard	1	2	3	4	5
Flexibility	1	2	3	4	5
Teachability; openness to new ideas/other's input	1	2	3	4	5
Current involvement in ministry	1	2	3	4	5
Interest in Africa	1	2	3	4	5
Familiarity with urban ministry	1	2	3	4	5
Understanding of what the Bible says about the poor	1	2	3	4	5

What is your favorite movie and why? _____

What is your favorite Christian book (besides the Bible) and why? _____

List some of your interests _____

What would you say are some of your gifts and abilities that would contribute to this trip? (Eg. Can play a musical instrument)

Using an additional sheet of paper, please write one to three paragraphs for each of the following.

1. Tell when and how you became a Christian and what's been happening lately in your relationship with God.
2. Describe your involvement in Christian fellowship and ministry to others over the past few years.
3. Why do you want to go to Africa? What do you hope to gain from the experience?



Reference

Please provide 3 references, one from each of the following categories:

References should be notified that they may be asked to answer reference questions. Please provide us with information below for the reference you would like us to contact.

Pastor or spiritual leader/mentor

Reference Name: _____ Reference Occupation: _____

Reference Email: _____ Reference Phone: _____

Relation to Reference: _____

Supervisor or teacher or employer

Reference Name: _____ Reference Occupation: _____

Reference Email: _____ Reference Phone: _____

Relation to Reference: _____

Family Member

Reference Name: _____ Reference Occupation: _____

Reference Email: _____ Reference Phone: _____

Relation to Reference: _____

Applicant Agreement

To the extent of my knowledge, the information on this application is truthful and accurate. I understand that background checks revealing undisclosed evidence of criminal activity and/or child abuse will disqualify me from consideration for this internship program with Africa Revolution. By means of this release, I authorize Africa Revolution to make inquiries about me with the people listed in this application.

Signature: _____ Date: _____

Return completed application, with a recent photograph to:



P.O. Box 477448
Chicago, IL 60647
USA

If you have any questions, feel free to contact us at 847-903-2977 or internship@aficarevolution.org.
You will be contacted by us when your application is received.

