



ATTACH
PICTURE
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(2"x2" or larger)

APPLICATION FORM

PART I
General
Information

Please Print
Full Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone (____) _____ Cell Phone (____) _____

Email : _____

Age: _____ Male: __ Female: __ Birthdate: _____ Shirt Size: _____

Parents' / Legal Guardians' Names: _____

Do you currently live with your parents / legal guardians? Yes No

If not, Parent's Address: _____

City: _____ State: _____ Zip: _____

Parents' / Legal Guardians' Phone (____) _____

Do your parents support your membership in the Barnabas Summer Internship Program?
Yes No

If not, please explain:

If accepted, do you understand that you will be making at least a 1-year commitment to your local church? Yes No

Have you smoked within the last six months? Yes No
If yes, please explain:

Have you drank alcohol within the last six months? Yes No
If yes, please explain.

Do you currently or have you used illegal drugs in the past? Yes No
If yes, when was the last time and what kind of drugs?

Have you been committed to Biblical morality in your lifestyle and relationships? Yes No

Have you had any addictions? Yes No
If yes, please give the date/s and explain.

Have you ever been arrested? Yes No
If yes, please give the date/s and explain.

Have you ever been in jail/prison? Yes No
If yes, please explain.

Are you currently involved in a romantic or a dating relationship? Yes No
If yes, please describe.

Is there anything else about your history and lifestyle we should know? Yes No
If yes, please explain.

PART II
Essay
Questions

Essay Questions

Type **two** of following questions in essay format (less than 1,000 words):

1. Give us a short, brief history of who you are and how you came to know God?
2. What is your life calling and your strategy to accomplish it?
3. What leadership experience have you had in church? In what role or capacity? For how long?
4. What are three of your greatest strengths? What are your three greatest weaknesses?
5. Why do you want to be a part of Barnabas Summer Internship?

I hereby acknowledge that I have answered the previous questions honestly and accurately to the best of my ability.

Signed: _____ Dated: _____

You must also have three references. One must be from a Pastor, including youth pastor, from your local church. No Relatives Please

PART III
Medical
Insurance

Medical Insurance

Name of Family Physician: _____ Phone (____) _____

Do you carry family medical Insurance: YES / NO (circle one)

Carrier Name: _____

Phone (____) _____

Group Policy Number: _____

Name of Policy Holder: _____

Secondary Contact Information In the event of an emergency, Barnabas Summer Internship leadership will contact the parent or legal guardian immediately. If we are unable to reach you, please list a secondary person whom we can call.

Name _____ Phone (____) _____

Relationship _____ Evening Phone (____) _____

PART IV
Sending
Information

Sending Information

Please send in the following items (mandatory for acceptance):

1. The application
2. Essays
3. A recent photo of yourself
4. Make sure your references get sent in, there needs to be three.

Send to:

Barnabas Summer Internship

P.O. Box 1369

Corsicana, Texas 75151

Applications must contain all required components in order to be processed and reviewed.

All applications must be received by June 15th.

Please direct questions to:

713.249.6299

josh.impact@yahoo.com

www.impactetx.com

