



# THE REVOLUTION CHURCH

INTERNSHIP APPLICATION

Name: (Last)	(First)
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Home Address: (Street)	(City)	(State)
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Phone: (Home)	(Cell)	Email:
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Birthday:	Country of citizenship?
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Father's/Guardian's Name
Mother's/Guardian's Name

Church Name	City & State:
Phone:	Pastor's Name:

Which of the following areas of ministry do you enjoy or find that you have a gifting? Check all that apply.

<input type="checkbox"/> Pastoral	<input type="checkbox"/> Dance	<input type="checkbox"/> Children's Ministry	<input type="checkbox"/> Media & Video Production
<input type="checkbox"/> Youth Ministry	<input type="checkbox"/> Worship	<input type="checkbox"/> Administration or Secretarial	<input type="checkbox"/> Prayer & Intercession
<input type="checkbox"/> Prophetic Art	<input type="checkbox"/> Evangelism / Street Ministry	Other:	

### **Educational and Academic History:**

Year of high school graduation:	Years of completed college?
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Describe your academic strengths and weaknesses:


**Personal History:**

When did you receive Jesus Christ as your personal savior?

Briefly describe your lifestyle before your salvation:

Have you been baptized in water? If so, when?
Have you been baptized with the Holy Spirit? If so, when?

Please write the story of how you met Jesus in 100 words or less:

List your reasons for wanting to participate in the Revolution Church Internship:

What calling do you believe God has placed upon your life (schooling, ministry, occupation, etc.)?


How do your parents/guardians feel about you participating in the Revolution Church Internship?

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How many siblings do you have?

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Describe your involvement at your church (ministry, assistance, teaching, ushering, attendance, etc.) :


In which Ministry area are you planning on participating?

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What are your plans after the Revolution Church Internship?


Please describe your devotional life (time devoted to prayer and Bible reading) over the past three months:


Please describe any conditions you have (or have had in the past two years) that affect your relationships, ability to study, or other areas of life (depression, anxiety attacks, attention deficit disorder, etc.):


During the past 6 months have you engaged in behaviors that are inconsistent with the life of a believer? (drunkenness, drug use, sexual activity, viewing pornography, lying, cheating, etc.) If yes, please describe.


Will it be difficult for you to respond to the authority of the Revolution Church staff?

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**Internship Agreement:**

I have read the current Revolution Church Internship information pages, and I agree to fully comply with all program rules. I understand that my compliance with these guidelines applies to me during the entire time I am a Revolution Church intern, including weekends, scheduled breaks, times of travel, and mission's trips. I understand that this internship is for a term of nine (9) months starting in September through June of each respective year. I understand that I have the option of serving for two terms in my ministry area.

(circle one) YES / NO

All information provided in this application is complete and accurate. I realize that supplying incomplete or false information in this application, or during my interview with the Revolution Church Staff, may result in my failure to be accepted into the Revolution Church intern position, or may result in being dismissed from the program. I consent to the sharing of information written on this application, as well as the information I share during my application interview with the staff of Revolution Church.

Applicants Signature:	Date:
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**Submission of Application:**

Please send your completed application to:  
The Revolution Church  
2018 Westview Drive  
Port Angeles, WA 98363

**For Foreign Applicants:**

You must be 18 years of age. A valid visa and passport is required for the duration of the Revolution Church Internship. You must bring the papers associated with your visa and your passport with you to the Church. Please contact us for a separate guide to help you attain the proper clearance for your participation in the Revolution Church Internship.

Type of Visa:	Dates Visa is effective:
Type of Passport:	Dates Passport is Valid:

Will your Visa need to be renewed during your time in the Revolution Church Internship?
Will your Passport need to be renewed during your time in the Revolution Church Internship?

LIN Number: #
Name of U.S. Consulate or Embassy, which issued your Visa, and the name of the city and country in which it is located:

**Application Checklist:**

- \_\_\_\_\_ Non-refundable \$35 application fee, made out to The Revolution Church (fee is waived if application is postmarked at least six-months prior to start date)
- \_\_\_\_\_ Completed Application
- \_\_\_\_\_ Two confidential references from Christian friends/Family
- \_\_\_\_\_ One confidential reference from a Pastor
- \_\_\_\_\_ Recent photograph (graduation or passport style)
- \_\_\_\_\_ Completed health care information form
- \_\_\_\_\_ Photocopy of current immunization record (only for students not living at home)
- \_\_\_\_\_ Photocopy of current driver's license and proof of insurance
- \_\_\_\_\_ Completed interview with the Revolution Church staff
- \_\_\_\_\_ Criminal background check (to be completed at time of interview)

**Friends Confidential Reference**

The Revolution Church Internship | Port Angeles, Washington.

Applicant's Name:
Phone Number:

The individual named above has applied to become a student in the Revolution Church Internship program. The Revolution Church is a nine- month, intense, church-based, leadership training school for young adults who desire to grow in their knowledge of the Bible and in their ability to minister effectively. Serious consideration will be given to your comments. Carefully and quickly complete this form and return it directly to The Revolution Church. Your comments will be held in confidence. Any additional comments may be made on a separate sheet of paper and attached to this reference. **Family members may not fill out this form.**

**Applicants Instructions:**

This form is to be filled out by a Christian friend and mailed directly to The Revolution Church.

The Revolution Church  
 2018 Westview Drive  
 Port Angeles, WA 98363

Please check the box that best describes the applicant:

<input type="checkbox"/> No observation	<input type="checkbox"/> Mental Ability	<input type="checkbox"/> Personal Motivation	<input type="checkbox"/> Maturity
<input type="checkbox"/> Appearance	<input type="checkbox"/> Church attendance/involvement	<input type="checkbox"/> Spiritual growth observed	<input type="checkbox"/> Self-image
<input type="checkbox"/> Emotional stability	<input type="checkbox"/> Coping with personal problems	<input type="checkbox"/> Response to pressure	<input type="checkbox"/> Financial responsibility
<input type="checkbox"/> Honesty	<input type="checkbox"/> Openness / transparency	<input type="checkbox"/> Moral standards	<input type="checkbox"/> Positive attitude
<input type="checkbox"/> Judgment / common sense	<input type="checkbox"/> Creativity	<input type="checkbox"/> Adaptability / flexibility	<input type="checkbox"/> Teamwork / cooperation
<input type="checkbox"/> Servanthood	<input type="checkbox"/> Follows instructions	<input type="checkbox"/> Liked by others	<input type="checkbox"/> Teachable
<input type="checkbox"/> Concern for others	<input type="checkbox"/> Communication skills	<input type="checkbox"/> Leadership ability	<input type="checkbox"/> Self-discipline

Physical condition of health:       Excellent       Good       Fair       Poor

In your opinion, this applicant's Christian witness is which of the following:

Please comment on areas of strength or weakness in the character of the applicant?
<input type="checkbox"/> Mature <input type="checkbox"/> Contagious <input type="checkbox"/> Genuine and growing <input type="checkbox"/> Over-emotional <input type="checkbox"/> Superficial

What specific gifts or abilities do you recognize in this applicant?

Does this applicant have any persistent problems or habits that might restrict him/her from fitting into an intense and challenging program? If so, please describe.

To your knowledge, during the past six-months has the applicant engaged in behaviors that are inconsistent with the life of a believer (drunkenness, drug use, sexual activity, viewing pornography, lying, cheating, etc.)? If yes, please describe:

Would you recommend this applicant for acceptance into The Revolution Church Internship program?
How many years have you known the applicant?

How close do you consider your relationship to be?  
 Very close       Fairly close       An acquaintance       Minimal

Applicants Name:
Referents Name:
Address:

City:	State:	Zip:	Phone:
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Referents Home Church Position in Church (if applicable):
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**Friends Confidential Reference**

The Revolution Church Internship | Port Angeles, Washington.

Applicant's Name:
Phone Number:

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The Revolution Church  
 2018 Westview Drive  
 Port Angeles, WA 98363

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Physical condition of health       Excellent       Good       Fair       Poor

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Would you recommend this applicant for acceptance into The Revolution Church Internship program?
How many years have you known the applicant?

How close do you consider your relationship to be?  
 Very close       Fairly close       An acquaintance       Minimal

Applicants Name:
Referents Name:
Address:

City:	State:	Zip:	Phone:
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Referents Home Church Position in Church (if applicable):
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**Pastors Confidential Reference - The Revolution Church Internship | Port Angeles, Washington.**

**Applicants Instructions:**

This form is to be filled out by a Christian friend and mailed directly to The Revolution Church.

The Revolution Church  
2018 Westview Drive  
Port Angeles, WA 98363

If your father or mother is your pastor, please give this form to the assistant pastor or youth pastor in your church who knows you best. If a person other than your pastor (assistant pastor or youth pastor) completes the form, an explanation should be provided.

**Pastors Instructions:**

The applicant named below has applied to become an intern in The Revolution Church. The information requested on this form will assist us in evaluating the applicant's ability to succeed in this intense training program. The applicant cannot be considered until all reference forms are received; therefore, your quick completion of this form would be very much appreciated. This reference will be kept in confidence. Thank you for your assistance.

Applicant's Name:
Phone Number:
How long have you known the applicant?
How long has the applicant attended your church?
How well do you know the applicant?

How would you describe the level of commitment shown by the applicant?

<input type="checkbox"/> Highly committed	<input type="checkbox"/> Somewhat committed	<input type="checkbox"/> Low level of commitment
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Evaluation of applicant's emotional maturity (please check one):

<input type="checkbox"/> Outstandingly mature. Has demonstrated an ability to function effectively under stress.	<input type="checkbox"/> More mature and emotionally stable than average.	<input type="checkbox"/> Possesses adequate emotional stability and maturity.
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How does the applicant usually react in stressful, difficult situations (check all that apply)?

<input type="checkbox"/> Has demonstrated some inability to function effectively under stress.	<input type="checkbox"/> Has frequently demonstrated signs of inability to cope with stress, such as anger or withdrawal.	<input type="checkbox"/> Withdraws	<input type="checkbox"/> Gets discouraged
<input type="checkbox"/> Gets angry	<input type="checkbox"/> Accepts patiently	<input type="checkbox"/> Acts constructively	<input type="checkbox"/> Seeks assistance from leaders

Has applicant proven on any occasion to be unreliable, dishonest, or of questionable character?

No     Yes

If yes, please explain:

As far as you know, has the applicant ever been arrested for any offense?

No     Yes

If yes, please explain:

Please check the box that best describes the applicant:

<input type="checkbox"/> No observation	<input type="checkbox"/> Mental Ability	<input type="checkbox"/> Personal Motivation	<input type="checkbox"/> Maturity
<input type="checkbox"/> Appearance	<input type="checkbox"/> Church attendance/involvement	<input type="checkbox"/> Spiritual growth observed	<input type="checkbox"/> Self-image
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<input type="checkbox"/> Servanthood	<input type="checkbox"/> Follows instructions	<input type="checkbox"/> Liked by others	<input type="checkbox"/> Teachable
<input type="checkbox"/> Concern for others	<input type="checkbox"/> Communication skills	<input type="checkbox"/> Leadership ability	<input type="checkbox"/> Self-discipline

Physical condition of health:       Excellent       Good       Fair       Poor

In your opinion, in which of the following areas of ministry does the applicant seem gifted?

<input type="checkbox"/> Speaking	<input type="checkbox"/> Dance	<input type="checkbox"/> Children's Ministry	<input type="checkbox"/> Media & Video Production
<input type="checkbox"/> Youth Ministry	<input type="checkbox"/> Worship	<input type="checkbox"/> Administration or Secretarial	<input type="checkbox"/> Prayer & Intercession
<input type="checkbox"/> Prophetic Art	<input type="checkbox"/> Evangelism / Street Ministry	<input type="checkbox"/> Teaching	<input type="checkbox"/> Other

If you were to consider this applicant for an intense, fast-paced and challenging discipleship program, would you feel that this applicant has the capacity and potential to succeed?

Yes     No

If no, please explain:

To your knowledge, during the past six-months has the applicant engaged in behaviors that are inconsistent with the life of a believer (drunkenness, drug use, sexual activity, viewing pornography, lying, cheating, etc.)?

If yes, please describe:


Do you recommend the applicant for acceptance as an intern of The Revolution Church?

Yes     No     With hesitation

If you would like to share any additional information, please attach a separate sheet with this reference, or indicate below that you would like a phone call to discuss this reference further.

Applicant's Name:
Referent's Name:

Address:
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City:	State:	Zip:
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Referent's Phone:
Referent's Home Church Position in Church (if applicable):

Signature	Date
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Please mail to:  
The Revolution Church  
2018 Westview Drive  
Port Angeles, WA. 98363  
Phone: (360) 360-477-4844  
Email: [jason@irevchurch.com](mailto:jason@irevchurch.com)