



Cross & Impact Discipleship Training School (DTS) APPLICATION

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

Home Address _____

Present Address _____

Phone _____ E-mail _____

I wish to apply for the Cross & Impact DTS 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 _____

Legal Information

Have you had excessive problems with alcohol, tobacco, violence, addictions to drugs or medication?

Yes

No

Do you have any criminal charges, even if dismissed? (e.g. speeding tickets, drugs, misdemeanors, felonies, etc.)

Yes

No

Sending Church: _____

Address: _____

Pastor's Name: _____

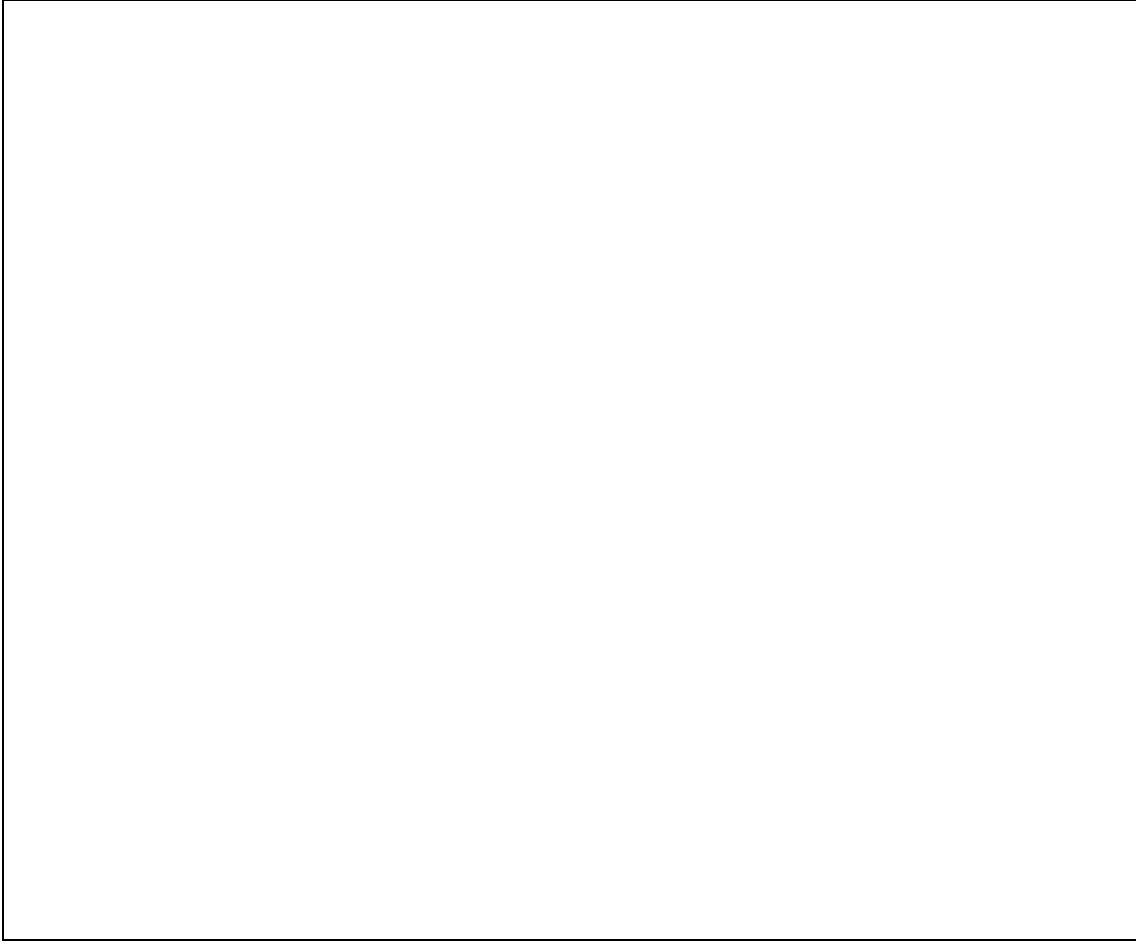
Phone Number & Email: _____

List the names and email/phone numbers of the three individuals filling out your reference forms. (One must be your Pastor/Spiritual leader/Peer relationship)

Personal History: Briefly describe the following:

What is your main purpose in applying for Cross & Impact DTS?

Describe how you met Jesus and what He means to you.

A large, empty rectangular box with a thin black border, intended for the user to write their response to the question above.

Describe your current relationship with the Lord.

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What areas in your life are you seeking to develop?

How would you describe your relationship with your family?

What do you enjoy doing and spend the most personal time on?

What are your greatest strengths? What are your greatest weaknesses?

What Church involvement have you had?

What can we be praying for you?

Please email a complete application to info@ywamshantihk.org, we will contact you once we receive the form. Thank You!

An application fee of HKD\$300 (USD\$40) will also be collected, please visit this page for payment instructions. <https://www.ywamshantihk.org/donate>

Please feel free to let us know if you have any question.

Signature and Date

1/F, Block E, Fok Sing Bldg, 14-24 Tai Pei Tau Path, Yuen Long

元朗大坡頭徑 14-24 號 福星樓 1 樓 E 室

ywamshanti@gmail.com