

Checklist:

1. **APPLICATION FORM** This application form is for application to Discipleship Training Schools with Youth With a Mission, University of the Nations Bali (UofN Bali). All questions must be answered. If a question does not apply to you, write N/A (not applicable) in the space provided. Husbands and wives enrolling as students must complete separate application forms.

IMPORTANT: Applications from overseas students should be returned eight weeks prior to the start of the school to ensure sufficient time for visa processing. Applications may be received up to 4 weeks before the start of the school, but there is a risk that your visa will not be processed in time for the start of the school.

2. **REGISTRATION FEE** A Rp. 100,000 registration fee must be forwarded with your application. This fee is not refundable. Your application will be processed upon receipt of the registration fee. If you are an overseas applicant please forward your registration by bank draft in rupiah or as otherwise advised by the Registrar.

3. **PHOTO** Please attach a recent photo of yourself (together with spouse and children, if applicable)

4. **PERSONAL REFERENCES** Reference forms must be completed by your:

(i) Pastor / Spiritual Leader

(ii) Employer / Teacher / Other

Please request they complete the form and email or mail it directly to the Registrar.

5. **MEDICAL REQUIREMENTS** Please complete all questions regarding your personal health history. If the school staff have any specific concerns they may ask you to also have a supplementary reference form completed by your doctor.

6. **RELEASES** All five legal releases must be signed before your application can be processed.

7. **PASSPORTS** All foreign students attending a YWAM school must have a valid passport with an expiration date of at least 6 months after the conclusion of the school. Indonesian students are highly recommended to have a passport prior to arrival in order to participate in an international outreach. Please include a copy of the photo-page of your passport with this application.

Note RE: VISAS Please do NOT apply for a visa until you receive confirmation of enrolment from UofN Bali and the appropriate papers. If you have a current Indonesian visa, please tell us what type of visa you have and when the visa expires.

8. **HEALTH INSURANCE** Please attach a copy of your health insurance card or letter of coverage.

ALL FORMS ARE TO BE MAILED OR EMAILED TO:

UofN Bali

c/o The Registrar

P.O. Box 5008

Jimbaran, Bali 80364

Indonesia

Fax: +62 361 702 253

Email: registrar@uofnbali.org

Please Note: After we receive your application the school staff will process it and pray over it and they will let you know as soon as possible if you are accepted.



Discipleship Training School Application

Dates of School Applied for: _____

PERSONAL DATA

Mr / Dr / Mrs / Miss _____ (Please underline surname)

Date of Birth (Day/Month/Year) ____/____/____ _ Nationality _____

Marital Status (Please Circle One): Single / Engaged / Married / Widow / Divorced

Please list the names & ages of any family members who will be coming with you (spouse, children, etc.)

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Home Address _____

City _____ Province / State _____ Postal Code: _____

Country _____ Telephone Number (including country code) _____

Email Address _____

EMERGENCY CONTACT INFORMATION

Name _____ (Please underline surname)

Relationship _____ Telephone Number (including country code) _____

Email Address _____

SKILLS

English Language Ability (Speaking and Listening): Fluent / Intermediate / Basic / None

Indonesian Language Ability (Speaking and Listening): Fluent / Intermediate / Basic / None

Other Languages Spoken _____

Talents, Abilities, and Hobbies _____

EDUCATION AND WORK EXPERIENCE

What is your highest level of education? _____

Please list any degrees or professional training certificates you have obtained _____

What was your most recent job (company, title/role)? _____

How long did you work there? _____

Other past jobs: _____

PERSONAL MEDICAL HISTORY

What is the general condition of your health? Excellent / Good / Fair / Poor (Please circle one)

Are you presently under a doctor's care for any condition? (specify) _____

Do you have any physical or psychological conditions that you are currently receiving treatment / medication for?

Are you taking prescription medication at this time? (specify) _____

Do you have a history of emotional instability, depression, psychiatric treatment, or eating disorders? (specify)

Do you have any disabilities or health problems that could limit your participation in the school program?

Please list any food or drug allergies: _____

Is there anything else about your health history or physical condition that we should know about?

If the school staff have any specific concerns they may ask you to also have a supplementary reference form completed by your doctor.

HEALTH INSURANCE All non-Indonesians are required to have valid medical insurance that includes international incident coverage. All Indonesian students are required to have domestic medical insurance through a private or government provider. **Please include a copy of your insurance card or letter of coverage with this application.**

IMMUNIZATIONS Immunizations are not compulsory, but we strongly recommend having all of your immunizations up-to-date, including Hepatitis A/B, Tetanus, Polio, and MMR. Getting immunized against tuberculosis, rabies, and typhoid is optional. *Please note there is no malaria in Bali.*

CHURCH AFFILIATION

Church Name _____ Location / Branch City _____

Denomination _____ Attended Since: _____

Pastor's Name _____

Telephone Number _____ Email _____

What church / missions involvement have you had? _____

In your opinion, what are some of the giftings God has given you to minister to others? _____

How does your pastor feel about your intention to do this school? _____

REFERENCES

Please list the names of your 2 references so that we know who to expect a reference form from:

1. Pastor / Spiritual Leader Reference _____
2. Employer / Teacher / Other Reference _____

LEGAL & POLICE RECORD

Are you involved in any current or pending lawsuits or legal proceedings? YES / NO

If yes, please give details: _____

Do you have a police record (civil or military)? YES / NO

If yes, please give details: _____

FINANCIAL STATUS

Fees for the 3 month lecture phase include accommodation, meals, and school materials. It does not include the cost of the 3 month outreach phase. You will be informed of the costs for your outreach during the lecture phase. The following is the cost of the lecture phase, based upon your country of citizenship. For current estimated exchange rates please check a website such as www.xe.com.

| | |
|-------------------|-------------------------|
| World A Nations- | 22 Million Rupiah (IDR) |
| World B Nations - | 16 Million Rupiah (IDR) |
| World C Nations - | 8 Million Rupiah (IDR) |

All school fees are to be paid in Indonesian Rupiah either by bank transfer or in cash upon arrival. The lecture fees are due during the first week of the school. The outreach fees must be paid by the end of the lecture phase.

Do you or will you have the complete lecture phase fees prior to the start of the school? YES / NO

If no, how much do you have saved now? _____

How do you plan to meet the remaining amount? _____

SUPPLEMENTARY QUESTIONS

Directions: Please type or write in legible handwriting on separate paper the answers to the following questions. Please write your name at the top of each page. Write "Not Applicable" / NA for those questions that do not apply to you. Submit your answers together with this application form.

1. Describe your conversion experience and your present relationship with God.
2. All YWAM training exists to help you grow spiritually, equip you for God's work, and prepare you for mission. Are there personal issues with which you are presently struggling? What areas of your character are you presently seeking God to further develop and improve?
3. Why are you applying for this school and particularly in this location?
4. What are your expectations for this school?
5. Do you sense a long-term call to missions?
6. All of our training schools are run in a community living situation. Are you prepared to live and learn within the context of a community with many different nationalities and cultures?
7. Is there anything else you feel we should know about you?

LEGAL RELEASES

DECLARATION

I declare that all information disclosed in this application form and its attachments to be true and correct. I have not withheld any relevant information. I agree to the use of the information (including the disclosure) by the staff of YWAM for any purpose pertaining to my training or well being.

I agree to abide by the regulations and expectations of the UofN school. I hereby confirm that if I am accepted, unless otherwise arranged with the school leader, I will complete the entire school.

Applicant's Signature _____ Date _____

RELEASE OF LIABILITY

I do hereby release YWAM/UofN Bali, its agent, employees and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss of life which may be sustained by me during the course of involvement with UofN Bali.

Applicant's Signature _____ Date _____

CONSENT FOR TREATMENT

I do hereby agree to the performance of medical treatment, anaesthetic and operation as the attending physician/surgeon deems necessary.

Applicant's Signature _____ Date _____

CONSENT FOR BURIAL

In the case of accidental death, the law of the country may require that the body be buried or cremated. Although every attempt will be made to fulfill the family's wishes concerning the disposition of the deceased, this may not be possible.

I, the undersigned, hereby grant consent for the burial/cremation of my body in accordance with the law in that location, in the eventuality of my death while in the service of YWAM /UofN Bali.

Applicant's Signature _____ Date _____

ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY

I confirm that I understand payment of the required school tuition and fees must be made on or before my arrival, unless otherwise arranged with leadership, and I agree to do so. I also confirm that I am fully aware of my financial obligation, both to the Lord and to the students and staff at the school. I therefore accept all responsibility for my fees, tuition and personal expenses incurred during my involvement with YWAM/UofN Bali.

Applicant's Signature _____ Date _____

IF Applicant is under 18 years of age the release and consent must be countersigned by a parent/guardian

I have read all the above statements and agree with them as the legal parent/guardian of the applicant.

Parent / Guardian Signature _____ Date _____

Name of Parent/Guardian: _____

Relationship with Applicant: _____