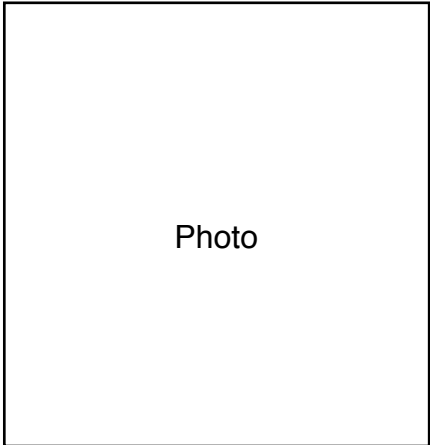


DISCIPLESHIP YEAR 2017-18



New Wine Discipleship Year Application Form 2017-18

Please select your top 3 New Wine Training Centres for training
(1 being your first choice)

- 1. _____
- 2. _____
- 3. _____

1. About You

First names: _____ Surname: _____
Date of birth: ____ / ____ / ____ Male Female
Marital status: _____ Number of dependents: _____
Present occupation: _____

Your houses

Permanent contact address: _____
Post code: _____
Tel day: _____ Mobile: _____
Email: _____
Present address (if different): _____
Post code: _____

2. Your education (starting with most recent)

Dates		University/college	Course	Qualification
from	to			
		School	Subjects	Grades

3. Your employment

dates		Company/organization	Job title/description of role	Reason for leaving
from	to			

4. Your church

Current Church: _____ For how long? _____

Church address: _____

Pastor's name: _____

Are you in a small group (home group)? _____

Please briefly outline your involvement with this church: _____

5. Your spiritual journey

Please describe how you became a Christian: _____

Please outline your journey since then, highlighting key experiences that have grown your faith:

6. Your passions

Why are you interested in the New Wine Discipleship Year? _____

What do you hope to get out of this year? (e.g. learning, experience, personal growth)

Do you already have aspirations or ideas about what you might do after the year?

7. Your interests

Please briefly describe you interests, hobbies and other recreational activities:

8. Your Schedule

The New Wine Discipleship Year is a part time commitment of 20 hours a week (8hrs teaching and 12hrs serving, which may include up to 4hrs on a Sunday).

At which church of organisation would you like to serve your internship?

Trinity Cheltenham

Other church or organisation: (name) _____

Where would you like to serve your internship (i.e., which ministry). **Please select a maximum of 2.**

Children Yes / No

Youth Yes / No

Students Yes / No

Worship Yes / No

Administration Yes / No

Evangelism Yes / No

Family outreach Yes / No

Creative media Yes / No

Church operations Yes / No

Other Describe.... _____

Do you have any preference about which other days you will spend with us, as part of the internship element?

Yes / No

9. Your point of contact

Have you already approached a New Wine Training Centre / church / pastor / internship supervisor about getting involved the 2016-17 Discipleship Year?

Yes / No

If yes, please state who/where: _____

10. Transport

Do you have a driving license? Yes / No

A minibus license? Yes / No

Will you have a car during your year in with us? Yes / No

11. Your finances

How do you propose to finance yourself during the Discipleship Year? _____

12. Your history

Please state the nature of any health problems or disabilities that you have including any regular medication that you are currently taking or anything further you think we may need to know:

Have you ever been convicted of a criminal offence, or do you have any pending convictions?

Yes / No

If yes, please give details: _____

13. Your references (these people will be contacted prior to your interview)

Church leader (small group/cluster/pastor)

Personal (another church member)

Name: _____

Name: _____

Position: _____

Position: _____

Address: _____

Address: _____

Post code: _____

Post code: _____

Tel day: _____

Tel day: _____

Tel eve: _____

Tel eve: _____

Email: _____

Email: _____

Please send these references the New Wine Discipleship Year Reference Form, asking them to please complete it and return it directly to your first choice Training Centre.

14. Your word

I confirm that the information I have given on this form is accurate and true
(type your name if completed electronically):

Signed: _____

Date: _____

**Once completed, please return to your first choice New Wine Training Centre.
If your first choice New Wine Training Centre is full, your application will be
passed on to the next training centre with available space.**