

**please print**

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Alias (or other names you've gone by) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_  Male  Female

Home Phone (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Marital Status  Single  Divorced  Widowed

If not US citizen please give nationality, visa classification, and number:

\_\_\_\_\_

Parent/Guardians' names

\_\_\_\_\_

Are your parents in agreement with your desire to be in this program?  Yes  No

Emergency contact: Name \_\_\_\_\_

Phone #1 (\_\_\_\_) \_\_\_\_\_ Phone #2 (\_\_\_\_) \_\_\_\_\_

Do you have a valid driver's license?  Yes  No Will you have a vehicle to drive while in this program?  Yes  No

**education**

High School \_\_\_\_\_ Year Graduated \_\_\_\_\_ GPA \_\_\_\_\_

Address \_\_\_\_\_

College \_\_\_\_\_ Year Graduated \_\_\_\_\_ GPA \_\_\_\_\_

Address \_\_\_\_\_ Major \_\_\_\_\_

Other \_\_\_\_\_ Year Graduated \_\_\_\_\_ GPA \_\_\_\_\_

Address \_\_\_\_\_ Major \_\_\_\_\_

Extracurricular activities in which you have participated in

\_\_\_\_\_

**employment**

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Dates \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Position \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Dates \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ Position \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**skills**

Listed below are skills that may be valuable in this program. Please read them carefully and mark all that apply.

(You may use more than one letter for a particular skill.)

E - Some experience L - Skills you like to do P - Very proficient W - Skills you want to learn D - Skills you dislike

List any other experience you have acquired which you think will benefit you in this program:

- |                          |                        |                                |
|--------------------------|------------------------|--------------------------------|
| _____ Accounting/Finance | _____ Graphic Arts     | _____ Data Entry               |
| _____ Drama Production   | _____ Secretarial      | _____ Sound Board Operation    |
| _____ Receptionist       | _____ Audio Production | _____ Computer Programming     |
| _____ Advertising        | _____ Journalism       | _____ Data Processing          |
| _____ Events Coordinator | _____ Photography      | _____ Personnel Administration |
| _____ Sales              | _____ Telemarketing    | _____ Travel Services          |
| _____ Administration     | _____ Television       | _____ Typing wpm               |

**self-evaluation / ministry profile**

On a scale of 1 to 10, with 10 being the highest, please evaluate your personal strengths and weaknesses.

Describe your relationship with your family \_\_\_\_\_

\_\_\_\_\_

Describe your best friend \_\_\_\_\_

\_\_\_\_\_

What tends to upset you most? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How many books do you read in a year, besides the Bible? \_\_\_\_\_

What was the title of the last book you read, and when did you finish it?

Title \_\_\_\_\_ Date \_\_\_\_\_

What were the last three movies you saw?

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

How many hours of television do you watch each week? \_\_\_\_\_

financial information

Because our students live on a limited income, it is important for us to know the extent of their financial commitments.

Debt/financial obligation (institution):

Monthly payment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do you intend to cover any financial needs during this program?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**desired involvement**

Please indicate the areas of involvement by order of interest to you. (i.e. 1, 2, 3)

\_\_\_\_\_ Children’s Ministry \_\_\_\_\_ Jr. High \_\_\_\_\_ High School \_\_\_\_\_ College \_\_\_\_\_ Community Outreach

Why do you feel your #1 choice is the best fit for you?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**references**

Pastor’s Name \_\_\_\_\_ Length of acquaintance \_\_\_\_\_

Church Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

List your church involvement and ministry experience \_\_\_\_\_

\_\_\_\_\_

Name of a friend \_\_\_\_\_ Length of acquaintance \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

**christian experience**

Have you received Jesus Christ as your personal Lord and Savior?  Yes  No

If yes, where & when? \_\_\_\_\_

Have you been filled with the Holy Spirit (according to Acts 2:4)?  Yes  No

If yes, where & when? \_\_\_\_\_

Have you been baptized in water?  Yes  No

If yes, where & when? \_\_\_\_\_

**do you believe**

Yes  No In the virgin birth and deity of our Lord Jesus Christ?

Yes  No That Jesus is God’s Son and the only sacrifice for sin?

Yes  No That a man must be born again to receive eternal life?

Yes  No In eternal reward for the believer? (Heaven)

Yes  No In eternal damnation for the lost? (Hell)

Yes  No In the rapture of the church prior to the 7-year Tribulation?

Yes  No In the infallibility of the scriptures?

Yes  No That divine healing is part of the redemption’s purpose and is God’s will for all who believe?

Yes  No That Jesus rose bodily from the dead?

Yes  No In the infilling of the Holy Spirit?

Yes  No That speaking in tongues is the initial physical evidence of the baptism of the Holy Spirit?

**lifestyle**

Please answer the following carefully and truthfully. Answering yes to any of these questions does not disqualify you from consideration for this program, please be open and honest. Failure to do so may result in dismissal from this program.

Do you have any limitations or conditions preventing you from performing certain types of activities?  Yes  No

If yes, explain \_\_\_\_\_

Do you presently have any communicable diseases (including HIV or AIDS)?  Yes  No

If yes, explain \_\_\_\_\_

Have you been accused of and/or convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?  Yes  No

If yes, explain \_\_\_\_\_

Have you been accused of and/or convicted of any criminal act?  Yes  No

If yes, explain \_\_\_\_\_

Have you ever been expelled from school?  Yes  No

If yes, explain \_\_\_\_\_

Are you presently involved in any kind of romantic, dating relationship?  Yes  No

If yes, explain \_\_\_\_\_

Have you been involved in homosexual activity within the last five years?  Yes  No

Within the past year have you:  Yes  No used tobacco?  Yes  No used illegal drugs?

Yes  No used alcohol?  Yes  No viewed pornography?

## **biographical information**

Please answer the following questions briefly typed on separate pages.

1. Give an overview of your personal history. Please include where you grew up, family situations, childhood to present, and how you feel these experiences will affect your participation in this program.
2. Tell how and when you became a Christian and about your personal growth in Christ.
3. Who has made the biggest impact on your life, besides the Lord? Explain.

video-bio

Please video yourself answering the following questions briefly on a DVD or VHS tape and send it with your application.

Please

state the question before answering.

1. Describe your current walk with the Lord, including how your faith is growing, the spiritual influences in your life, your quiet times, and church involvement.
2. Please acknowledge and explain three of your strengths.
3. Please acknowledge and explain one of your weaknesses.
4. Explain how and why you feel God is calling you to be a part of the EDGE School of Ministry. Include how you believe this program can help you meet your goals and how you can help fulfill the mission of Elevate.

I hereby testify that the above information is true to the very best of my knowledge. I clearly understand that acceptance is subject to: fulfillment of all requirements, space availability, and failure to keep any of the above qualifications is grounds for dismissal.

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Signature Date

Your application will not be processed without the following:

- A recent photo of yourself (No group shots please)
- Typewritten biographical information
- DVD or VHS video-bio
- Letter of recommendation from a pastor on staff at your church
- \$25 Non-refundable application fee

ALL OF THE ABOVE MUST BE RECEIVED BY **JULY 31, 2009**.

NO LATE APPLICATIONS WILL BE ACCEPTED.

Mail to:  
Victory Assembly of God  
ATTN: EDGE  
2561 W. Ruthrauff Rd.  
Tucson, AZ 85705  
Phone: 520.293.6386  
Fax: 520.293.1863  
E-mail: [edge@tucsonvictory.org](mailto:edge@tucsonvictory.org)