

For Office Use Only

Name _____

Position Applying for _____

Case Manager _____

Self Awareness Interviewee _____

Counselor _____

Marriage Counselor _____

App. Start/Return Dates _____



**Attach Photograph
Here**

**Antioch Church Planting School/
(Confidential)**

Please type or print, answering all questions.

Date: ____/____/____

(If you do not know, please contact the Antioch Church Planting School Administrator.)

Have you previously applied for the Antioch Church Planting School (or ATS?) _____ If yes, were you accepted? _____

If you were accepted but did not attend, please explain: _____

If you were **not** accepted, why (to the best of your knowledge)? _____

Did you attend an Antioch Discipleship School? _ Year _____ Hosting Church? _____

For which position in the "GO" book are you applying? (Please include position #) _____

Personal Information

Mr./Mrs./Miss/Ms. _____

(Legal Name) Last First Middle

Preferred Name _____

Current Mailing Address _____ (____) _____

Street number Cell phone

City State Zip (____) _____

Home phone

Permanent Address (If different) _____

Street Number City State Zip

Email address: _____ Business Phone(____) _____

Date of Birth ____/____/____ Sex _____ Social Security Number _____

Citizen of which country: _____ Do you have a legal right to work in the United States? _____

If not a U.S. citizen, please give visa classification and number _____

Passport Number _____ Date of Expiration _____

Myers-Briggs Type Indicator (if known):

Family (check all that apply)

Single Are you currently dating anyone? _____ If so, who? _____
 Engaged Is your fiancé applying for the Antioch Church Planting School? _____
 When do you expect to get married? _____ Fiancé's name and DOB _____
 Married Is your spouse applying for the Antioch Church Planting School? _____
 Marriage date _____ Spouse's name and DOB (include maiden) _____
 Separated Date of Separation _____
 Divorced Date(s) of Final Decree(s) _____
 Grounds upon which divorce(s) was granted: _____
 Widowed Date of spouse's death: _____
 Have you ever had an annulment of marriage? No Yes

1. Please list your children and/or dependents.

Name	Gender	Birth date	Dependent? (Yes/No)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Are your children an/or dependents in good health? _____
 If not, please explain: _____

3. If you are expecting a child, please give approximate date of birth: _____

Financial Information

Tuition for the school is \$800 per person. A deposit of \$200 is due on date of acceptance.

Because Antioch Church Planting School students live on a limited income, it is important for us to know the extent of your financial commitments.

1. Do you have any debt? _____

Please fill in all of your monthly financial obligations as well as any debts you have.

****please note: credit card debt and/or car loans must be paid IN FULL before the start of the school. You cannot begin class with either credit card debt or car payments.**

Utilities, Rent, Insurance	Monthly Payments
_____	_____
_____	_____
_____	_____
_____	_____

Sources of Debt (cc, car, student loans, etc...)	Total Debt	Monthly Payments
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Do you have the financial responsibility of caring for your parents? _____
 If so, what is your responsibility? _____

Do you tithe (10%) regularly? _____ Do you give over & beyond a tithe regularly? _____

Education

List **all** schools attended after grammar school, such as high school, technical, college, secretarial, nursing, Bible institute or seminary.

School	State	Dates Attended	Grad. Date	Major	Degree/Diploma
_____	_____	_____ to _____	_____	_____	_____
_____	_____	_____ to _____	_____	_____	_____
_____	_____	_____ to _____	_____	_____	_____
_____	_____	_____ to _____	_____	_____	_____

Ministry Interests and Skills

Check **all that apply** to your current cell group status:

I have never been involved in leading cells
 I am not currently in cell leadership. The last position I held was: _____
 I attend a lifegroup. Leaders _____ Section Leaders _____
 I am a lifegroup intern. Leaders _____ Section Leaders _____
 I am a lifegroup leader. Co-Leaders _____ Section Leaders _____
 I am a section leader. Co-Leaders _____ Zone _____
 I am a zone pastor. Co-Leader _____

Have you taken any mission trips with **Antioch**? _____

When _____ Where _____ Leaders _____
When _____ Where _____ Leaders _____
When _____ Where _____ Leaders _____

Please check those vocational skills listed below in which you have an intermediate or above level of skill.

<input type="checkbox"/> Accounting/Finance	<input type="checkbox"/> Musical (specify) _____
<input type="checkbox"/> Administration	<input type="checkbox"/> Personnel Administration _____
<input type="checkbox"/> Audio Production	<input type="checkbox"/> Photography _____
<input type="checkbox"/> Clerical	<input type="checkbox"/> Public Relations _____
<input type="checkbox"/> Computer Programming (language) _____	<input type="checkbox"/> Video Production _____
<input type="checkbox"/> Contract Negotiation	<input type="checkbox"/> Sales _____
<input type="checkbox"/> Data processing (specify) _____	<input type="checkbox"/> Secretarial _____
<input type="checkbox"/> Graphic Arts	<input type="checkbox"/> Shorthand _____ WPM
<input type="checkbox"/> Journalism	<input type="checkbox"/> Typing _____ WPM
<input type="checkbox"/> Legal (specify) _____	
<input type="checkbox"/> Other (specify) _____	

Other Skills _____

Languages you speak (other than English) and fluency _____

What other ministry training have you received? Please list specific training and involvement

Biographical Information and Parent's contact information

1. Are your parents believers, and are they currently involved in a church?

2. What is your current relationship with your parents like? How do they feel about you doing this school?

3. Briefly describe your family background:

4. Please provide us with your parents' contact information:

Mother's name _____ email _____

Address _____ City _____ ST _____ Zip _____

Phone number _____

Father's name _____ email _____

Address _____ City _____ ST _____ Zip _____

Phone number _____

Church/Spiritual Background

1. When did you become a Christian? Month _____ Year _____ Your age at that time _____

2. Name of church where you are a member _____ How long? _____

3. Have you ever been involved in the occult, new age practices, or a cult (Mormons, Jehovah's Witness, etc.)? _____

If so, explain: _____

4. Have you been water baptized? _____ Date _____

5. Are you a licensed minister? _____ Ordained? _____ When? _____ By whom? _____

Employment History

Please list most recent employer first.

Employer _____ Dates employed ____ / ____ to ____ / ____

Address _____ Phone _____

Job title _____ Type of work _____

Reason for leaving _____

Who was your direct supervisor? _____

What was your level of job satisfaction? 1 2 3 4 5

Employer _____ Dates employed ____ / ____ to ____ / ____

Address _____ Phone _____

Job title _____ Type of work _____

Reason for leaving _____

Who was your direct supervisor? _____

What was your level of job satisfaction? 1 2 3 4 5

PART TWO

Testimonial Information

Write a full report of how you feel called into church planting. Please use these guidelines. Be sure to read and complete all parts of the guideline. Please either type or print legibly.

1. State the circumstances that led you to understand God's call on your life.
2. To the best of your ability, name the type of work to which you are called and explain why. **Please include detailed descriptions of the various ways that God has confirmed this call** and give any details related to the vision you feel God has for your life.
3. Talk about how your lifestyle and actions have changed as a result of this vision in your heart.
4. If you are married, discuss how your spouse and or family feel about your calling.

Medical and Psychological

1. How many days were you absent from work (or school) due to illness in the last year? _____
2. Will you have medical insurance during the Antioch Church Planting School? _____
3. Do you have any health conditions, chronic illnesses, allergies or impairments that may affect your performance as a staff member? Any that require special care? If so, please explain.

4. Are you presently under medication prescribed by a physician? _____ If so, indicate medication, purpose and any limitations it may cause.

5. How often do you tend to experience strong anxiety? _____ Have you ever struggled with any related symptoms (i.e. cutting, panic attacks, attempted suicide, etc...)? Please explain:

6. Have you ever had any prolonged problems with depression or mood swings? Have you ever struggled with any related symptoms (i.e. cutting, panic attacks, attempted suicide, etc...)? If yes, please explain.

7. Have you ever struggled with an eating disorder (anorexia, bulimia, overeating, etc...)? _____ If so, please explain the nature of the problem, extent, when you began having difficulty and any other specifics that may help us to understand your particular situation.

8. Have you ever been treated for a drug or alcohol problem? If yes, please explain.

9. Have you seen a professional counselor in the past five years for any reason other than career or pre-marital counseling? _____ When? _____ For what purpose? How was it helpful? _____

10. Have you ever consulted a physician/psychiatrist/psychologist concerning a mental or emotional condition?
When? _____ For what purpose/How was it helpful? _____

11. Have you ever been physically or sexually abused, or raped? _____

If yes, please tell when these events occurred: _____

Have you seen a professional counselor about these events? _____ If yes, how was it helpful?

12. Have you ever been arrested? Please list all occurrences, dates and any convictions.

13. Have you ever had sexual or abusive thoughts or behaviors towards children? If yes, please explain.

14. Have you had episodes of rebellion in your life in the last 5 years(defiance of authority figures, not open to any accountability, defiance of rules or laws, illegal activities, etc.) _____ If yes, please explain:

15. Have you used narcotics, hallucinogens or drugs not prescribed by a physician in the past 10 years? _____

If so, what kind and when? _____

16. How often do you consume alcohol or tobacco products? _____

17. What are your thoughts in general on consuming alcohol and tobacco products?

Moral Convictions

I Timothy 3 outlines qualifications necessary for those who desire to be spiritual leaders. Those qualifications include being “above reproach” and having a “good reputation”. In light of this, AMI is highly concerned about the area of moral purity for our staff members. It is critical that our staff exhibit strong convictions and a lifestyle consistent with biblical standards.

The Bible makes it clear that we should avoid sexual immorality (I Thess. 4:3-6). Though God’s forgiveness is full and complete, there is a distinction between forgiveness for past sins and biblical suitability for spiritual leadership. A past problem in the areas addressed below does not necessarily disqualify you, provided: (1) it can be determined that convictions are strong and consistent with Scripture, and (2) a sufficient “time-tested” track record of victory has been established. The information that you share with us will be treated confidentially and will be seen only by individuals directly involved in your application process.

1. Are you willing to relinquish any social habits that might decrease your effectiveness as a witness of Jesus____

2. Have you ever been the subject of any disciplinary action, transfer or dismissal, as a result of an accident or mishap involving children?_____ Explain._____

3. Have you ever or do you currently struggle with homosexual tendencies? _____ If so, please explain (include month/year of last involvement and extent of physical involvement).

____ How does this affect your current relationship with the same sex? Is it still a struggle for you? _____

What are your convictions regarding pre-marital and extra-marital physical involvement? (i.e. petting and sexual involvement) _____

4. Have you had a relationship with anyone in the past 5 years which would not be considered pure? (i.e., petting, sexual intercourse, extra-marital involvement – physical OR emotional, etc.)_____ If so, when was the last occurrence of involvement in this kind of relationship? (Month/Year) _____
What was the extent of physical involvement? (Please be specific)

a. **Singles:** Have you dated other men/women since the last occurrence? _____ If so, what is the extent of your physical relationship with them? _____

b. **Married:** How has this affected your relationship with your spouse? _____

5. a. **Females:** Have you ever had an unmarried pregnancy/ies? _____ If yes, what was the outcome (i.e. full-term birth, miscarriage, abortion)? _____

b. **Males:** Have you ever been responsible for a female’s unmarried pregnancy? _____ If yes, what was the outcome of the pregnancy? _____ Please explain the circumstances: _____

6. Have you set guidelines for yourself in the physical area to ensure minimal temptation? ____ If so, what are they? _____

7. Are you currently having any struggles in the area of sexual purity (i.e. temptation, masturbation, fantasy, pornography, difficulty applying your guidelines/convictions, etc.)? If yes, please explain.

Self Awareness:

Please circle the 3 areas you struggle with most:

Comparison	Insecurity/Low self-worth	Self-Hatred	Materialism
Envy/Jealousy	Anger	Anxiety	Rebellion
Greed	Fear	Control	Passivity
Manipulation	Lying	Co-dependency	Hatred
Idolatry	Pride	Unforgiveness	
Other _____			
Gluttony	Lust (masturbation, pornography)	Depression	

Doctrine

Answer the questions from memory with a brief sentence or two. Please do not use your Bible or any other aid.

1. What do you believe about the Trinity?

2. Explain what you believe about the divine and human natures of Christ.

3. Was Christ sinless? Yes ___ No ___

4. Did He actually rise bodily from the grave? Yes ___ No ___ Explain

5. Do you believe that Jesus Christ will return to the earth? Yes ___ No ___ Explain.

6. What should a Christian's attitude be toward Christ's return?

7. Do you believe He will return in bodily form? Yes ___ No ___ Explain.

8. What is the role of the Holy Spirit in a person obtaining salvation?

9. What is the role of the Holy Spirit in the daily life of a Christian?

10. Please define the baptism of the Holy Spirit.

11. Every believer has at least one spiritual gift. What do you consider your gift(s) to be?

12. Please express your views on the following:

A. The origin of man and how the world came to be

B. The origin of man's sin

13. Apart from receiving Christ, can a nonbeliever do anything to make himself acceptable to God? ___ Yes ___ No Explain.

14. Scripturally what does the phrase "believe in Christ" mean?

15. Are there any mediators between God the Father and man, other than the Lord Jesus Christ?
Yes ____ No ____ Explain.

16. Where are nonbelievers who have died?

17. Can a nonbeliever be saved after death? Yes ____ No ____ Explain.

18. Is belief in Jesus Christ the only way to heaven? _____

19. What is your concept of:
Heaven

Hell

20. Is an individual who in his lifetime has never heard about Jesus Christ, and whose knowledge of God comes only through nature and conscience, responsible for this knowledge before God?
Yes ____ No ____ Explain.

21. According to your understanding, who is Satan/the devil?

22. Is the entire Bible inspired and free from human error in the original writing? Yes ____ No ____

23. Are there traditions/writings not in the Bible that a Christian has to obey? Yes ____ No ____

Calling to Antioch

24. What is your present understanding of the vision and goals of Antioch? _____

25. Are you able to make at least a 3-year commitment to Antioch and the Antioch team you are applying to join?

Yes ____ No ____

The primary goal of Antioch is to fulfillment of the Great Commission. We feel spiritual renewal is the key to change in society rather than the social and political realm. Staff members have their own political persuasions but these should be a part of their personal life and not a part of their ministry. A staff member's personal views should not be presented in a way that may lead others to believe it is the position of Antioch.

Do you understand and agree with this? Yes ____ No ____ If no, please explain

I declare by my signature below that:

- I pledge myself to help fulfill the Great Commission in our generation, depending upon the Holy Spirit to guide and empower me. (please initial ____)
- To the best of my knowledge, all of the information in this application is true and complete. I also authorize you to make such inquiries into my personal employment, finances, medical history or other related matters as may be necessary in arriving at an acceptance decision. I hereby release employers, schools or persons from all liability in responding to inquiring in connection with my application. (please initial ____)
- I hereby authorize all persons associated with me, including churches, employers, law enforcement agencies, licensing and social services, to release any information contained in their files or records concerning me to Antioch and its representatives. (please initial ____)
- I declare that I have not engaged in sexual abuse or inappropriate interactions with a child. If I am currently the subject of a complaint or disciplinary action due to such acts, I have notified appropriate personnel in Antioch Ministries International. (please initial ____)
- I understand my responsibility to report abuse and other inappropriate conduct toward a child to the Director of Training Schools or the Antioch Director of Pastoral Care. (please initial ____)
- I understand Antioch takes allegations of child abuse seriously and that abuse in any form will not be tolerated. I understand that Antioch will cooperate with civil authorities in the investigation of any report of abuse. (please initial ____)
- I hereby release Antioch Community Church, its agents, employees, and volunteer assistants from any liability whatsoever arising out of any injury, damage, or loss, which may be sustained by said person during the course of involvement with the Antioch Church Planting School, and Antioch Community Church. (please initial ____)
- I am aware that I am responsible to raise whatever financial support is necessary to fund my involvement with Antioch if I am accepted as a staff member. (please initial ____)

Signature of applicant _____ Date _____

References

Please give names, email addresses and phone numbers of **four** references that have known you for a *minimum of one year*. If any of the categories do not apply, please substitute an additional reference. (Please do not include spouse or relatives.)

1. **Current Spiritual Leader** (Lifegroup leader, Section Leader, etc.)

Name _____ Length of acquaintance _____
Email _____ Phone (____) _____

2. **Antioch Discipleship School Director or D-Group Leader** (if applicable; if not, please substitute a more recent spiritual leader)

Name _____ Length of acquaintance _____
Email _____ Phone (____) _____

3. **Business Associate or Former Employer**

Name _____ Length of acquaintance _____
Email _____ Phone (____) _____

4. **Peer/Friend**

Name _____ Length of acquaintance _____
Email _____ Phone (____) _____