



## Bible School for the Nations Application

Thank you for your interest in YWAM Wylie's Bible School for the Nations! It is our intention that the application process serve as a valuable tool in helping you, your church, and us in YWAM to prayerfully evaluate whether this is the right course for you at this time.

Husbands and wives enrolling as students must complete separate application forms. Please note the information requested on this form is restricted to details relevant to our consideration of your application at this stage.

It is a prerequisite that you successfully complete a Discipleship Training School in order to be accepted into a Bible School for the Nations, per the University of the Nations requirements.

As this course is designed to train Christians, a general entry requirement is that you have a genuine commitment to Jesus Christ and the Christian faith.

**Which year are you applying for?\***

**Name\***

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*First Name*

*Middle Name*

*Last Name*

**Preferred name**

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*First Name*

*Last Name*

**Date of Birth\***

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*Month*

*Day*

*Year*

**Current Age\***



**Address\***

*Address Line 1*

*Address Line 2*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*City*

*State*

*ZIP Code*

*Country*

**Home Phone\***

**Email\***

**How did you hear about YWAM Wylie?\***



## Language

Please identify and rank your English language proficiency (speaking & writing included) on a scale of 1-10 below. (1: barely - 10: native language)\*

Please list any other languages and your proficiency

## Disability

Do you consider yourself to have a disability, impairment, or long-term condition?\*

YES

NO

## Military Service

Are or were you in any military service?\*

YES

NO



## Marital Status and Family History

**Marital Status\***

- Single       Engaged       Married       Separated       Divorced  
 Remarried       Widowed

**How many children do you have?\***

**Mother's First and Last Name\***

**Mother's Phone Number\***

**Mother's Email Address\***

**Father's First and Last Name\***

**Father's Phone Number\***

**Father's Email Address\***



## Emergency Contact Information

**In case of an emergency, please contact:\***

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First Name

Last Name

**Relationship\***

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**Cell Phone\***

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**Home Phone\***

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**Work Phone**

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**Email\***

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## Passport Information

I currently...\*

- Have a passport       Don't have a passport  
 Have a passport, but it expires within 6 months from the end of DTS

**Birthplace\***

**Country or Countries of Citizenship\***

**Passport Number\***

**Date Issued\***

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**Expiration Date\***

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**Place of issue\***

*As shown on the Passport*

**Do you currently hold a US Visa? (If you are not a US citizen)**

- YES       NO

**Visa Type\***

**Expiration Date\***

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**Date Issued\***

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**Place of Issue\***

*As shown on visa*

## Church Information

**Home Church\***

**Church Address\***

*Address Line 1*

*Address Line 2*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*City*

*State*

*ZIP Code*

*Country*

**Church Phone Number\***

**Denomination\***

**Pastor's Name\***

**Years Attended\***



**Describe your relationship with your local church.\***

**What leadership experience have you had? (i.e. Sunday School teacher, board member)**

## Financial Information and Support

**Do you presently have debts?\***

YES

NO

**If yes, please explain:\***

**Do you have any pledged support?\***

YES

NO

**How much?\***

**If you do not have pledged support, how do you plan to support yourself if accepted to BSN?**



## Legal Information

**Are you involved in any current or pending lawsuits or legal proceedings?\***

YES                       NO

**Have you ever been convicted of a felony?\***

YES                       NO

**Do you have a police record?\***

YES                       NO

**Have you ever been convicted of a sexual crime?\***

YES                       NO



## Education Experience

**What is the highest level of education you have completed?\***

- High School / Equivalent
- College / University
- Graduate School
- None of the above

**What year did you graduate?\***

**Name\***

**Address\***

*Address Line 1*

*Address Line 2*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*City*

*State*

*ZIP Code*

*Country*

**When and Where did you do your DTS?\***

**DTS School Leader\***

<input type="text"/>	<input type="text"/>
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*First Name*

*Last Name*



Have you completed any other schools with YWAM? If yes, please state which schools and when.

Why do you desire to attend this school?\*

What are your plans after completing this training?\*

## Work Experience

Please list your two most recent occupations.

Name of Employer

Job Title and Description

Skills needed and acquired

Start Date\*

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End Date\*

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Name of Employer

Job Title and Description



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**Skills needed and acquired**

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**Start Date\***

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**End Date\***

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## Christian Life and Experience

Please prayerfully answer the following questions briefly. If you have any questions or need more clarity, please feel free to contact us.

**Please describe your salvation experience or explain how and when God became real and personal to you. Please give month and year, if possible.\***

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**Please describe your present relationship with the Lord.\***

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**Describe other significant spiritual experiences you have had in your walk with the Lord.\***

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**How would you describe your relationship with your family? Include how they feel about your plans to attend this YWAM program.\***

**Please describe your long term goals. What has God spoken to you about your life's calling? Specify.\***

**Have you had any missions experience? If so, where and what types of ministry were you involved in?\***

**This course will require roughly three hours of homework per day. Are there any circumstances you know of that would prevent you from completing your assignments?\***



**Do you currently use or have any history of using tobacco, alcohol, marijuana, or other drugs? If so, when? Please explain.\***

**What areas of your character are you presently seeking God to further develop and improve?\***

**Please list any special circumstances or situations that we should know about.\***

**Is there anything else that you would like to share with us about yourself?**



## References

Please name your pastor, and most recent YWAM leader who you will ask to be your references. You may access the reference forms on our website, under the apply now tab.

**YWAM Leader Reference\***

**YWAM Location\***

**Email\***

**Pastor Reference\***

**Email\***



## Consent for Treatment

In the event of inquiry or illness of the undersigned (applicant) while in association with YWAM Wylie/Youth With a Mission South Dakota Inc., I/we hereby agree to the performance of such treatment, anesthetics and operations as, in the opinion of the attending physician, is deemed necessary. I/we understand that if I should need to have medical treatment, I/we are financially responsible for any treatment or payments related to said treatment. I/we also understand that should any medical incident require travel, I/we are also responsible for all costs incurred.

**Applicant Signature\***

**Date\***

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**Parent/legal guardian signature (only if the applicant is under 18)\***

**Date\***

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**Relationship to the applicant\***



## Liability Release

I/we hereby release YOUTH WITH A MISSION Wylie/ and South Dakota, INC., its agents, employees, and volunteer assistants from any liability whatsoever arising out of an inquiry, damage, or loss with may be sustained by the undersigned (applicant) during the course of involvement with YOUTH WITH A MISSION, INC. I/we understand that should any incident occur that would require me/my child to leave the program, that all fees are non-refundable and I/we are responsible for any additional costs incurred, including but not limited to flight costs, hotel fees, etc.

**Applicant Signature\***

**Date\***

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**Parent/legal guardian signature (only if the applicant is under 18)\***

**Date\***

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**Relationship to the applicant\***



## Signature of Agreement

I certify that all information in the application is complete and accurate. I understand that if any information given is found to be false it could result in my removal or exclusion from the mission. If accepted by YWAM Wylie, I will abide by the spirit, rules, and schedule of the mission. I understand that payment of required tuition fees must be made upon or before arrival. I am fully aware of my financial obligation, both to the Lord and to the students and staff at Youth With A Mission. I therefore commit myself to paying all personal expenses incurred during my involvement with Youth With A Mission.

**I agree to all of the above statements:**

YES

NO

**Applicant Signature\***

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**Date\***

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**Parent/legal guardian signature (only if the applicant is under 18)\***

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**Date\***

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**Relationship to the applicant\***

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