

INCENSE & FIRE SCHOOL OF STRATEGIC PRAYER APPLICATION FORM

PERSONAL INFORMATION:

Full Name: _____

Current Address: _____

City: _____ COUNTRY: _____ POST CODE/ZIP CODE: _____

Email Address: _____ Facebook: _____

Telephone Number: _____ Skype: _____

Gender: Male Female Date of Birth: MO: DAY: YEAR:

Marital Status: Never Married Engaged Married Other (Please submit brief written explanation)

Please provide us with a little personal information about yourself: (Your family background, interests, hobbies etc.)

Please explain why you are applying to attend the Strategic Prayer School? _____

What do you hope to achieve during this course? _____

Are there any concerns or worries that you have about attending this Prayer School? _____

YOUR CURRENT CHURCH AFFILIATION:

The name of the church you currently attend? _____

Church Address: _____

Church Phone Number: _____ Denomination or Affiliation: _____

Senior Leader's Name/Title: _____

What Involvement do you have in your current church? _____

How long have you attended this church? _____ If less than three years, please give the name(s) of the church, location, leadership, reason for leaving and involvement in any other churches you have regularly attended during the last three year period:

EDUCATION:

High School (s) Attended and Location: _____

Graduation Date or Grade Completed/ Last Year Attended? _____

Major/Course of Study? _____

College(s) / Universities Attended and Location: _____

Major Course of Study? _____ Minor Course of Study _____

Graduation Date/Last Year Completed? _____

PRIOR CRIMINAL HISTORY:

Were you ever convicted of a crime/Do you have a criminal record? Yes No; If yes, Please provide detail(s) regarding each conviction including the type of conviction, date this incident occurred:

Are you currently under court ordered parole or required to complete community service? Yes No

If Yes, Please provide details including the reason, when did it take place? The time frame/how long is the period of parole or community service? When will it end? _____

EMPLOYMENT INFORMATION:

Are you currently employed? Full Time, Part Time; Please give the name and address of your employer:

What Position do you currently hold? _____

What duties do you perform in this role? _____

Have you held other positions with this employer? If yes, what positions/duties? _____

How long have you worked there? _____

If less than three years, please provide a brief description of your employment history over the past 3 years:

MEDICAL HISTORY:

Do you have any medical condition (disease, disorder or disability) which requires special attention or might limit your full participation in any aspect of the school? This includes allergies, epilepsy/seizures, emotional/anxiety or depression

that require medical treatment (now or in the past). Yes No If yes, please provide detailed information:

Please List any prescribed medications you are currently taking:

SPIRITUAL/MORAL HISTORY:

Do you have any spiritual or moral conditions (past or present) which require special attention or might limit your full participation in any aspect of the school? *IE spiritual bondage, addictions, sexual immorality, etc. (now or in the past).*

Yes No If yes, please provide detailed information:

Emergency Contacts: In case of emergency, please provide contact information of your family member or friends:

Name _____ Relationship: _____

Primary Telephone Number: _____ Secondary Number: _____

Address: _____

Name _____ **Relationship:** _____

Primary Telephone Number: _____ Secondary Number: _____

Address: _____

Personal References:

Please provide three personal references: Once we have received and reviewed your application form, the next step is to contact the persons listed below to request a personal reference/recommendation on your behalf.

Your personal reference (must be a mature Christian adult that is at least 25 years old, has known the applicant for at least three years and is not a relative).

Name _____

Address: _____

Telephone Number: _____ Email Address: _____

Name _____

Address: _____

Telephone Number: _____ Email Address: _____

Name _____

Address: _____

Telephone Number: _____ Email Address: _____

Pastoral Reference(s):

Please provide the name and contact information of the Senior Pastor and the name of pastor which you work under/report to from the church you currently attend. (If either pastor is a relative, you must provide the name of another church staff member.

Name _____

Address: _____

Telephone Number: _____ Email Address: _____

Name _____

Address: _____

Telephone Number: _____ Email Address: _____

YOUR COMMITMENT:

I will be committed to the prayer school during the course of the prayer school and will be fully involved in all aspects of prayer, associated ministry and service related to same. I will be committed to attending a local church during the 7-week period and will attend/participate in all Prayer School events I am asked during this time.

Since this is a full time course, I will not take part in any other full time employment or join another church or ministry until the 7-week period is over. I will arrive on time for each class and for meetings and fully understand the flexible nature of ministry. I also understand that daily start and end times, days and evenings off etc. is subject to change on a weekly basis. I am prepared to serve in whatever capacity I am asked to and will respect, honor and serve the Team Director, leadership of the school, other team members and those I am ministering to.

I am committed to personal discipleship, mentoring by the leaders/teachers of the organization and church and fully understand that discipline or corrective action may be taken in the event of violation of policies/rules.

I commit to a life of holiness, purity and integrity and will refrain from drunkenness, sexual immorality, inappropriate language, criminal behavior and any other activity that will negatively affect the reputation of Strategic Prayer International, the School of Strategic Prayer, Albania's Gateway House of Prayer, Balkan Networks, IPA Tirana or other partners, or any activity that goes against the clear teachings of the Bible.

By signing this document, I agree to fulfill all of the above requirements and am prepared to undergo a full reference, DBS and police check, if requested.

Printed Name	Signature	Date
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Please fully complete the application and email a completed copy to the following address:

apply@incenseandfire.org

or by post in Europe to: **International Protestant Assembly**
K.P. 1552
Rr Mustafa Matohiti, Nr 19
Tirana, Albania

Or by post in the US: **Strategic Prayer International**
7879 Plantation Drive
Mason, OH 45040

If you have additional questions, please email info@incenseandfire.org.

***** APPLICATION DEADLINE IS 21 FEBRUARY 2016. *****

This application must be completed and submitted no later than 21 February 2016.

Please remember that space is limited, and applications will be considered upon submission. **Earlier applications will be given priority consideration.**

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