

# Jacob's Well Church

## *Summer Intern Application*

**CONTACT INFORMATION** – print clearly

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**PERSONAL INFORMATION**

Contact information in case of emergency

Name \_\_\_\_\_ Relation to you \_\_\_\_\_

Phone number \_\_\_\_\_

Is there anything that we need to be aware of regarding your physical health?

Is there anything that may prohibit you from serving?

Parents' names and address(es)

\_\_\_\_\_

\_\_\_\_\_

**WORK HISTORY**

List the last three jobs or internships you held or your work history of the last five years beginning with most recent.

Employer / Organization	Dates	Position

**EDUCATION**

List *all* schools attended (college/university, business, trade, seminary) for the last five years beginning with most recent.

School / College	City, State	Dates	Field Of Study	Degree

Additional training, scholarships, awards, certifications:

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Languages studied – include dates and levels:

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**GIFTS and TALENTS**

List any hobbies, gifts, leisure activities and talents: \_\_\_\_\_

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**QUESTIONS and ANSWERS**

The main tenants of this *Summer of Service* is to live justly and simply in peace. With that in mind, please answer the following.

1. What attracts you to this internship opportunity?
2. Describe a time in your life when you were in hardship and your response.
3. Describe a time in your life that you experienced cross-cultural life.
4. Describe your understanding of the person of Jesus Christ.
5. Describe your best work or volunteer experience.
6. What conflict resolution technique do you use?
7. Describe a time when you were asked to fulfill a task that you lacked motivation or enthusiasm for.

8. Describe your strengths in a work setting.

9 Please give examples when you demonstrated reliability and flexibility in a work situation:

a.) Reliability –

b.) Flexibility -

10. What causes you stress?

11. What method do you employ to reduce stress?

12. Have you ever been convicted of a crime (other than a traffic violation)? If yes, explain.

13. How can this internship benefit you?

14. Out of the following intern assignments, where do you feel you'd be best? Briefly describe your answer below.

Middle School age children - *assist church staff to instruct and develop relationships with 12-14 year olds.*

High School age children – *compliment Youth Director to spiritually form teen-age students.*

Community Life - *assist Jacob's Well Koininia team with the development in Kansas City's Westside community.*

## **PERSONAL REFERENCES**

List the names and addresses of three people who know you well enough to judge your character, motivation or work ethic.

Name	E-mail	Phone	Relationship

**SELF EVALUATION**

Please indicate which side of the continuum you are on most often. Check the box to the right of the appropriate number.

I excel with group work.

I excel with independent work.

I like to have a consistent routine of assignments.

I like to experiment with new projects often.

I seek interaction with people.

I like to keep to myself.

I like to initiate projects.

I like to carry out tasks.

I enjoy a steady pace.

I enjoy a changing pace.

I excel with close supervision.

I excel with less supervision.

I process thoughts, preferences, and ideas internally.

I process thoughts, preferences and ideas externally.

Please write below any points on which clarification or conversation would be helpful.

I affirm that the information I have written is true. I understand that it will be used in dialogue with me toward finding an appropriate living and working placement for me during my *Summer of Service* at Jacob's Well Church. I authorize Jacob's Well Church to explore this information, my work history and qualifications, and any other information considered relevant, including but not limited to, my general character and family relationships. I authorize Jacob's Well Church to provide copies of my personnel file that it considers relevant to all persons responsible in the placement process of a mission/service agreement. I authorize any person or entity to provide the requested information to Jacob's Well Church. I release Jacob's Well Church and its representatives, and any person or entity (and its representatives) that provides information, from all liability arising from making the inquiries, providing the information, or deciding about my assignment as a result of the inquiries or information.

Signature \_\_\_\_\_

Date 44444

*Copies of this authorization showing my signature are as valid as the original release form. This authorization is valid for two years from the date signed. 444*