



INTERNSHIP APPLICATION

Name.....

Phone Number (.....) – Email.....

Please circle the semester you are interested in interning at New Hope Community Church:

Spring (March–May) Summer (June–August) Fall (September–November)

Birthdate...../...../..... Please circle: Male Female

Relationship Status: Single Married Divorced Widowed Married Again

Spouse’s Name, If Applicable..... Number of Years Married.....

Do you have children? If so, how many?.....

Emergency Contact Relationship to you

Phone Number (.....) –

Do you already have local housing secured for your internship? Yes No

If so, what is your address?

Highest level of education achieved:

N/A High School Diploma/GED Associate’s Bachelor’s Master’s Doctoral

Will you have access to a car during your internship? Yes No

Are you licensed to drive? Yes No

Will you have health insurance during your internship? Yes No

If yes, which company?



INTERNSHIP APPLICATION

Will you be employed during your internship? Yes No

If yes, where? What is your position?

Work Schedule

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College/University Information (if applicable)

Name of College/University.....

Major Minor

Current Year: Freshman Sophomore Junior Senior

School Address.....

Your Box Number

What organizations and leadership positions are you involved in ON campus?

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What organizations, projects, missions trips, etc. are you involved in OFF campus?

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INTERNSHIP APPLICATION

Relationship with Jesus

When did you commit your life to following Jesus?

Please describe your testimony in 500 words or less. (Use additional paper if necessary.)

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Do you sense a definite call to career ministry? Yes No

If applicable, how did you become aware of God's call to you for career ministry?
(Use additional paper if necessary.)

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If applicable, is there a particular direction in career ministry
in which you feel God has called you?

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INTERNSHIP APPLICATION

Have you been, or are you seeking to be, baptized in the Holy Spirit, with the "initial physical evidence" of speaking in tongues? Yes No

Do you fully and passionately agree with New Hope's statement of beliefs (see NewHopeCommunityChurch.cc)? Yes No

Have you been baptized in water? Yes No

Are you able to cheerfully submit to authority? Yes No

Do you actively seek to honor the Lord with your life and choices? Yes No

Please circle all the following spiritual gifts which you feel you are gifted in:

- | | | | |
|----------------|---------------------------|-------------|------------|
| Administration | Apostleship | Discernment | Evangelism |
| Exhortation | Faith | Giving | Healing |
| Helps | Interpretation of Tongues | Knowledge | Leadership |
| Mercy | Miracles | Pastoring | Prophecy |
| Service | Teaching | Tongues | Wisdom |

Other.....



COMMUNITY CHURCH
INTERNSHIP APPLICATION

CHURCH HISTORY

What is your current church?

Pastor's Name..... Estimated Church Size.....

Which of the following would best describe the community your church ministers to?

Rural Suburban Urban University Town Military

How long have you belonged to your church?

In what ways are you involved in your church?

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Will the pastor listed above be providing your pastoral reference? Yes No

If no, please provide details:

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COMMUNITY CHURCH

INTERNSHIP APPLICATION

COMPUTER SKILLS

How computer-literate are you? 1 2 3 4 5 (very computer-literate)

Do you own a personal laptop? Yes No

Do you have regular access to Wifi? Yes No

Do you have Adobe Creative Suite or Adobe programs? Yes No

If so, which Adobe programs do you have?.....

MEDICAL NEEDS

Do you have any health challenges that could potentially impact your participation as an intern at New Hope?
Please explain (use additional paper if necessary).

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Please list all known medical conditions, including food and drug allergies, asthma, diabetes, etc.

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OTHER

Do you have a criminal record? Yes No

If yes, please provide details (use additional paper if necessary).

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Are there any dates you know you will be absent during your potential internship semester?



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REFERENCES

Pastor Reference

Pastor's Name.....

Phone Number (.....) – Email.....

How many years have you known this pastor?

College Reference (if applicable)
Professor, Administrator, Advisor, etc.

Name..... Position.....

Phone Number (.....) – Email.....

How many years have you known this college reference?

Personal Reference #1

Name Relationship to you

Phone Number (.....) – Email.....

How many years have you known this person?

Personal Reference #2

Name Relationship to you

Phone Number (.....) – Email.....

How many years have you known this person?