

Academy of Evangelism and Servant School

**BOTH PARTS OF THIS APPLICATION FORM MUST BE COMPLETED EVEN IF YOU ARE NOT A
RESIDENT OF THE UNITED KINGDOM**

1/ Personal Details (Please complete in BLOCK CAPITALS)

Date:.....

First Name:..... Surname:.....Address:.....

Post Code:.....Home Phone Number:.....Mobile Phone Number:.....

Email Address:.....Date of Birth:.....Male/Female:.....

Current Occupation:..... Marital Status: Single - Engaged - Married.....

Widowed - Divorced - Single Parent..... Nationality:.....

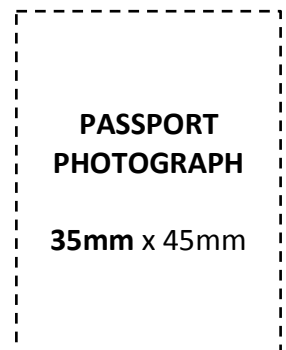
British / Eu / American / Other (Please State).....

2/ Please Attach a Passport-sized, recent photograph, please also provide a witness signature confirming that this a true likeness.

First Name of Witness.....Surname of Witness.....

Signature of Witness.....

Professional Status of Witness.....



PLEASE CONTINUE ON THE NEXT PAGE

3/ Now please tell us about the church you attend, and how long have you been part of this fellowship?

1/ What meetings in your Church do you attend?

2/ Do you have any responsibilities in your Church?

3/ Will attending this course affect your responsibilities?

Who would you kindly allow Gospel Vision to contact three Character references?

Your first reference must be your Pastor or Elder of your Church

1st Reference -Pastor/Elder:.....

Pastor/ Elder's First Name:..... Surname.....

The Name of your Church please:.....

Address:.....

The Church Telephone Number:.....

The Church's email address:.....

2nd Reference -First name:..... Surname:.....

Address:.....Email Address:.....

Mobile Number:.....

3rd Reference-First name:..... Surname:.....

Address:.....Email Address:.....

Mobile number:.....

4/ Please outline, and if necessary, continue onto the following page your reasons for applying for this evangelism Course, and why do you think this course will help you?

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5/ What do you consider to be your Spiritual gifts?.....

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6/ Please be so kind and tell us of your natural talents I/E Musical-Practical-Administrative

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HEALTH AND MEDICAL INFORMATION

Please provide explanatory information to these questions where necessary.

- (A) Are you generally in good health? Yes - No
- (B) Do you have any physical disabilities? Yes – No
- (C) Have you had any major illnesses? Yes – No
- (D) Do you have any communicable diseases? Yes – No
- (E) Are you on any medication or under a Physicians care? Yes – No
- (F) Have you ever had any psychiatric/psychological care, professional counselling? Yes- No
- (G) Have you been recently or in the last twelve months admitted to Hospital for any reason? Yes – No
- (H) Do you have any learning disabilities? Yes – No
- (I) Do you have any special dietary requirements? Yes – No

RELEASE, ACKNOWLEDGMENTS, AND COMMITMENTS.

Please read carefully.

1/ Release of liability

I do hereby release Gospel Vision and the Emmaus Academy, it's staff, agents and other volunteers and assistants, from any liability whatsoever arising out of any injury, damage or loss sustained by the above said persons during the course of my involvement with Gospel Vision and the Emmaus Academy.

2/ Acknowledgements

I understand that if I am an applicant from outside the European union, I will be responsible for my own medical insurance.

3/ Commitments

I agree to abide by the Gospel Vision rules and guidelines of behaviour.

If I am accepted, I will commit to the Academy teaching programs, including.

1/ By arriving at all sessions on time.

2/ I agree to their being two hours per day practical, I/E cleaning, gardening, serving, cooking, washing.

3/ I agree to attend all outreach and service activities that are part of my course.

4/ I promise to learn 1 Peter chapter 3-15 and to apply this verse to my life, and for the rest of my life.

5/ I understand that I will be trained for the mission fields of the world.

6/ I understand that I am making myself available to serve and not to be served.

In signing the below, you agree to all the above stipulations, and do certify that all the information given and read is understood and accurate.

Applicants Signature:.....Date:.....

Gospel Vision / Emmaus Academy, does not discriminate on the basis of race or gender, ethnic background, language, nationality or physical disability.

Contact information

**Gospel Vision Emmaus Academy, Emmaus House 142 Bradford Road, Idle.
Bradford, West Yorkshire BD10 8SA.
Charity Reg no 504140
Telephone +44 1274 620167
Email: info@gospelvision.co.uk**

1. Personal Details Continued (complete in BLOCK CAPITALS)

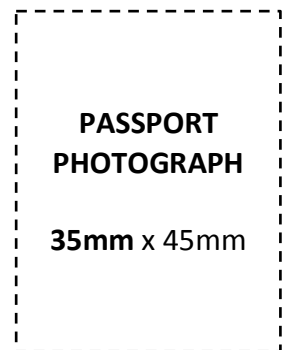
Please attach a passport-sized, recent photograph and provide a witness signature that this is a 'true and faithful likeness'.

I hereby certify that this is a 'true and faithful likeness of the applicant.

First Name:.....

Surname:.....

Signature:.....



2. Course Applied For (complete in BLOCK CAPITALS)

Please indicate which term or terms you will be applying for:

Autumn (Sept – Nov)	Spring (March – May)	Summer (June-August)

3. Christian Testimony

Please share with us how you became a Christian.

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4. Christian experience

(a) Please tell us about your local church. How long have you been a part of this fellowship? And how often do you attend Church meetings?

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(b) Please share with us about any opportunities for service or outreach you have been engaged in. Include some testimony of your current experience in walking with the Lord

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5. Future ambitions and goals.

Please outline your reasons for applying for this particular course, and how do you think it will help you in your future walk with our Lord?

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(6) Your Financial Responsibility

I understand that NO payment will be required for my Academy tuition fees. And that this is a faith ministry. (The Gospel Vision Trustees firmly believe that where God guides, he provides.) Should you decide to give a donation, this would be appreciated

I fully understand that if I am accepted, I will either have a single bedroom or I will share a bedroom. I also understand that I am responsible for preparing my own food, and that I am able to use the cooking facilities at the Academy. I am informed that there are plenty of restaurants and sandwich bakeries within walking distance of the Academy. All meals to be consumed in the dining kitchen.

(NO FOOD OR HOT DRINKS UNDER ANY CIRCUMSTANCES IS ALLOWED IN THE BEDROOMS)

I also understand that if I am accepted, I will be joining a servant's school, and learning to respect and appreciate others by being a servant and is a vital part of my personal training.

And so, I promise, to abide by Gospel Vision and the Emmaus Academy guidelines, structure and rules for behaviour.

If I am accepted, I agree and promise I will abide by the rules, commitments schedules of the Academy and servants' school to include:

1. Arriving at all the Academy activities and commitments on time. I/E Times of bible teaching and worship, devotions.
2. Attending all training sessions, classes and workshops that are part of my personal course of study.
3. Attending and participating in all outreach and service activities.
4. Behaving well and being respectfully to all other students as a good steward of the indwelling Grace of God in me.

In signing below, you agree to all of the above stipulations, and do certify that all the information given in both parts of this application is complete and accurate.

Applicant Signature:.....Date:.....

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<http://gospelvision.co.uk>