

Training School Application

YWAM Ships Orange County

Mail to P.O. Box 14637, Irvine CA 92623

FAX to +1 949 271 4909

Steps for Applying

1

Completely fill out the Application Form found on-line or on pages 3-5 of this document. Please type or print clearly in blue or black ink. Please put "n/a" for questions that do not apply to you. Be sure to attach a recent photo of yourself (from the shoulders up) in the space provided.

2

Completely fill out the Health Form found on pages 6 and 7 of this document. Please type or print clearly in blue or black ink. Be sure to have your physician fill out and sign the bottom portion of page 7.

3

Please have your YWAM Leader, and one Friend fill out and mail, fax or email the Reference Forms. Forms can be mailed or faxed. Information is on the front of this application.

4

Send in non-refundable application fee of \$50 USD (\$150 for International students) along with the complete application form Attention: Registrar. Forms can be mailed or faxed. Information is on the front of this application. Checks should be made out to YWAM.

5

The registrar will contact you to go over any questions you may have about your School.

6

When this is finished, your complete application will be turned into the School Director for approval. You should hear back from us within two weeks regarding your acceptance.

7

You can read information about the school on our web site. www.ywamships.net

Please return this form to: YWAM School Registrar, PO Box 14637, Irvine, CA 92623

Application Form

Attach a recent photograph here

School applying for Quarter _____ Year _____
1st, 2nd, 3rd or 4th

Date of application _____
Day/Mo/Yr

Application Fee Enclosed? _____
(\$50 singles, \$60 couples)

PERSONAL INFORMATION

Name _____
Last name/family name First Middle

Current Address _____
Street/P.O. Box _____
City _____ State/Province Zip/Postal _____ Country _____
Phone _____

Permanent Address (if different than above) _____
Street/P.O. Box _____
City _____ State/Province Zip/Postal _____ Country _____
Phone _____

Age _____ Birthday _____ Birthplace _____
Day/Mo/Year City State/Province Country

Sex M F Nationality _____ E-Mail Address _____

Ethnic Background (optional) Asian/Pacific Islander Hispanic Black
 Native American White/North American White/Other
 Other _____

Marital Status Single Dating Engaged Married Divorced Separated Remarried Widowed

Spouses Name _____ Date Married _____
Last name/family name First Middle

Will your Spouse be accompanying you (please see note below)? Yes No

Do you have any children? Yes No How many? _____

Children's Name _____ Age _____ Grade _____
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EMERGENCY INFORMATION

In case of emergency, notify _____ Relationship _____

Address _____ Phone _____

Street/P.O. Box

City

State/Province Zip/Postal

Country

HOME CHURCH INFORMATION

Home Church _____ Pastor's Name _____ Denomination _____

Address _____ Phone _____

Street/P.O. Box

Length of Attendance _____

City

State/Province Zip/Postal

Country

LANGUAGE PROFICIENCY

Please identify and indicate your language proficiency on the line below

- 1. Elementary Speaking 2. Limited Work Proficiency 3. Minimum Professional Proficiency
- 4. Full Proficiency 5. Native Speaking Proficiency 6. Mother Tongue

English Proficiency _____ Other languages and Proficiency _____

Language

Proficiency

EDUCATIONAL EXPERIENCE

I completed High School/Secondary School College/University

Names of Institutions

Address

Dates Attended

Degree/Major/Degree Date

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PASSPORT/VISA INFORMATION

Country of citizenship _____
Name listed on passport _____ Passport number _____
City and country where passport was issued _____ Passport expiry date _____
Visa type _____ Date visa issued _____
City and country where visa was issued _____ Visa expiry date _____
Have you ever been refused a visa? Yes No (give nation and details) _____

FINANCIAL INFORMATION

Do you have your complete school fees? Yes No If no, from what source will they come? _____

ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY

I understand that payment of the required school tuition fees must be made in U.S. currency prior to or upon my arrival, unless otherwise approved in writing by the School Leader before departure for the school campus. Further, I agree to meet in a timely manner, prior to the completion of the school, all expenses incurred during my involvement with Youth With A Mission and University of the Nations.

Applicant's Signature _____

Date _____

Day/Mo/Year

Tuition Return Policy—School tuition must be paid before or upon arrival in school campus; exceptions made only by special written permission from school leader. Application fee is non-refundable. We hope that when the students arrive, they continue with the school until graduation. This return policy applies should a student, for whatever reason, decides to drop out early.

Before the first week of classes.....100%
During the first week of classes.....85%
During the second week of classes.....70%
During the third week of classes.....55%
During the fourth week of classes.....40%
During the fifth week of classes.....25%

I CERTIFY THAT ALL INFORMATION IN THIS APPLICATION IS COMPLETE AND ACCURATE

Applicant's Signature _____ Date _____

Day/Mo/Year