

HAVE YOU EVER BEEN CONVICTED OF ANY OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION?

YES

NO

IF YES, GIVE DATES AND CIRCUMSTANCES ON A SEPARATE SHEET OF PAPER. A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU.

III. EMPLOYMENT RECORD

Please list and describe your employment positions for the past 5 years. Begin with your most recent employment. Be clear, concise and complete. Include accomplishments and leadership experience. If necessary, you may attach additional pages.

1. COMPANY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		
2. COMPANY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		
3. COMPANY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		

IV. COMMUNITY ACTIVITIES

Please list and describe your volunteer or community service experience for the past 5 years, including HOPE *worldwide*, church or other. Do not list experience previously recorded in Section III. Be clear, concise and complete. If necessary, you may attach additional pages.

1. AGENCY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS: SUPERVISOR: TELEPHONE NUMBER:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
2. AGENCY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS: SUPERVISOR: TELEPHONE NUMBER:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
3. AGENCY/ORGANIZATION:	DATES month/year I.e., 5/09	TITLE:
ADDRESS: SUPERVISOR: TELEPHONE NUMBER:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	

V. EDUCATIONAL BACKGROUND

Please list all schools attended, training completed and job-related professional licenses and certifications.

	NAME CITY AND STATE	MAJOR/MINOR AREA OF STUDY	DEGREE	DATE COMPLETED
HIGH SCHOOL				
UNDERGRADUATE				
GRADUATE				
OTHER (TRADE)				
TRAINING (INCLUDE volunteer organizations)				
	TYPE	NUMBER/STATE	DATE ISSUED	DATE EXPIRES
LICENSES				

VI. LANGUAGE SKILLS

Assignments with Thousand Oaks Ranch may require providing service to persons with limited English proficiency. Do you speak a language in addition to English? Check all appropriate boxes.

LANGUAGE(S)	READ	WRITE	UNDERSTAND	COMFORTABLE MAKING PRESENTATIONS
1.				
2.				

VII. PERSONAL STATEMENT

WHY WOULD YOU LIKE TO BE INVOLVED WITH THE THOUSAND OAKS RANCH INTERNSHIP PROGRAM?

VIII. REFERENCES

PROVIDE THE NAMES AND DAY TIME TELEPHONE NUMBERS OF TWO ADDITIONAL PEOPLE, NOT RELATED TO YOU, WHO ARE FAMILIAR WITH YOUR QUALIFICATIONS. ONE MUST BE FROM YOUR MINISTRY LEADER.

1. NAME:

DAYTIME TELEPHONE NUMBER:

ALTERNATE TELEPHONE NUMBER:

2. NAME:

DAYTIME TELEPHONE NUMBER:

ALTERNATE TELEPHONE NUMBER:

IX. CERTIFICATION AND AGREEMENT

Please read carefully before signing

I certify that all statements I made on the application are true and complete to the best of my knowledge and I have withheld nothing that would affect Thousand Oaks Ranch's decision to accept me. If accepted, I understand any false information I have given, whenever discovered, is cause for dismissal. I acknowledge that I have read the above statements and understand them. I authorize Thousand Oaks Ranch (camp) and the DFW International Church of Christ (church) to solicit and obtain from former employers, colleagues and other persons who know me, information that would be helpful in making decisions about my selection and I release such parties from any liability regarding such disclosure. I authorize the camp/church to conduct criminal and driving background checks using my Social Security #, Birth Date, and Driver's License # to obtain such information. All information provided and obtained through this authorization will be used solely for the purpose of this application and will not be used for any other purposes or shared with any other parties.

SIGNATURE: _____

(DO NOT PRINT)

DATE: _____