



SARASOTA  
**HOUSE OF PRAYER**  
TRAINING CENTER

**(RE)new INTERNSHIP APPLICATION**  
July 14 – August 28, 2018

**Personal Information**

Date of application (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State, Zip code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

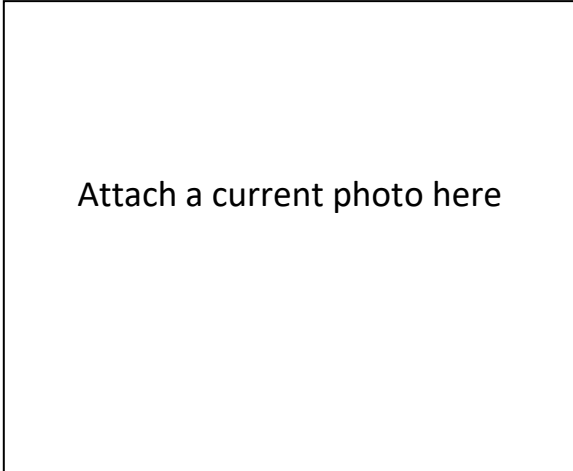
Gender: Male or Female

Date of birth (MM/DD/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact \_\_\_\_\_

Relation to applicant \_\_\_\_\_

Mobile phone \_\_\_\_\_ Home or work phone \_\_\_\_\_



**Internship Information**

**Dates:** July 14 – August 28, 2018

**Schedule:** Weekly: Tuesdays (7:00pm – 9:00pm)

Saturdays(9:00am – 1:00pm)

Team Building/Weekend Retreat Dates: Announced at start of Internship

**Age:** 16+

**Cost:** \$200

There is a \$50 nonrefundable registration fee

[www.sarasotahop.com/renew](http://www.sarasotahop.com/renew)

## Education, Employment, and Ministry Background

Please indicate the highest level of education you have completed.

- |   |  |
|---|--|
| <input type="checkbox"/> GED or equivalent                    | <input type="checkbox"/> College/university undergrad degree |
| <input type="checkbox"/> Senior high/secondary school diploma | <input type="checkbox"/> Graduate degree                     |
| <input type="checkbox"/> Vocational school                    | <input type="checkbox"/> Postgraduate degree                 |

List senior high/secondary school and institutions of higher education you have attended, beginning with the most recent.

School name	City, state	Dates attended	Diploma, degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List previous places of employment, beginning with the most recent.

Employer	Location	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you involved in a local church?  Yes  No If no, please explain on a separate sheet of paper.

If no, have you been involved in a church in the past?  Yes  No

List church involvement, beginning with the most recent.

<i>Church name</i>	<i>City/state</i>	<i>Dates</i>	<i>Senior pastor</i>
_____	_____	_____	_____
Attended: <input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally			
_____	_____	_____	_____
Attended: <input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally			
_____	_____	_____	_____
Attended: <input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally			

**Write out your testimony (1 page on back page or on separate piece of paper)**

Describe any previous ministry training and involvement you have been a part of:

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What led you to apply for the RE(new) Internship?

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**Checklist to submit application**

- Complete entire application
- Attach a picture ID
- Attach Your Testimony (1 page)
- Nonrefundable \$50 Registration Fee secures your place in the internship
  - o Online at [www.sarasotahop.com/donate](http://www.sarasotahop.com/donate) // Checks made out to Sarasota House of Prayer
- Turn in application to Keith Phillips or email to keith@sarasotahop.com

Print Name \_\_\_\_\_ Date (MM/DD/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_