



# Youth With A Mission

## Skjærgårdsheimen NORWAY

### STAFF APPLICATION FORM

Attach a recent photograph

Position Applying For \_\_\_\_\_

Available from (time) \_\_\_\_\_ Length of commitment \_\_\_\_\_  
Mo/Yr Year(s)

### Personal Information

Legal Name \_\_\_\_\_  
Family/Last First Middle Preferred Name

Permanent Mailing Address \_\_\_\_\_  
Street/P.O. Box City

\_\_\_\_\_ State/Province Zip Postal Code Country

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Number \_\_\_\_\_ Sex:  Male  Female

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_  
Day/Mo/Yr Country

Marital Status:  Single  Engaged  Married (Date \_\_\_\_\_)  Separated (Date \_\_\_\_\_)  
 Divorced (Date \_\_\_\_\_)  Widowed (Date \_\_\_\_\_)

Spouse's Name \_\_\_\_\_  
Family/Last First Middle Preferred Name

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Citizenship \_\_\_\_\_  
Day/Mo/Yr Country

#### Dependants Names of children accompanying you:

Last/Family	First name	Middle name	Age	Birth date (D/ M/ Y)	Sex (M/F)

### Passport/Visa Information

Country of Citizenship \_\_\_\_\_ Passport Number \_\_\_\_\_

Name as listed on passport \_\_\_\_\_  
Family/Last First Middle Preferred Name

Place of issue \_\_\_\_\_ Passport Expiry Date \_\_\_\_\_  
Day/Mo/Yr

Have you ever been refused a Visa?  No  Yes (please give nations and brief details) \_\_\_\_\_

\_\_\_\_\_





### Home Church Information

Home Church \_\_\_\_\_ Denomination \_\_\_\_\_

Pastor's Name \_\_\_\_\_ Length of Attendance \_\_\_\_\_

Permanent Mailing Address \_\_\_\_\_

Street/P.O. Box

City

State/Province

Zip Postal Code

Country

Phone Number \_\_\_\_\_ Web address \_\_\_\_\_

Is your pastor/church in favour of you applying for this position?  Yes  No

### Education, Occupational Experience and Other Skills

I completed  High School/Secondary School  Equivalent of High School/Secondary School

Name of Institution

Dates of attendance (D/ M/ Y)

	from	to

Have you acquired any degree or major?  No  Yes Type \_\_\_\_\_

List any significant job/occupational experience you have had:

Position

Dates position was held

	from	to

Other skills, talents or special interests \_\_\_\_\_

Type of driving license  None  Car  Large truck  Public  Bus

First/Native Language \_\_\_\_\_

Other Languages

Level of Ability

Fluent

Conversational

Basic

Fluent

Conversational

Basic

### YWAM/U of N Background Information

List any previous YWAM/U of N experience or schools:

School/Experience/Position

Location

Leader/s

Date

School/Experience/Position	Location	Leader/s	Date





## Health Form

**Note:** Medical Insurance is compulsory in Norway, so please ensure you possess valid insurance for the first three months. Within this time you will most likely be enrolled in the national social security.

Do you have medical insurance?  Yes (Please include a photocopy of your policy with these application forms.)

No (If you do not have insurance we can obtain it for you at additional cost.)

Medical Insurance Company \_\_\_\_\_ Policy  
Number. \_\_\_\_\_

Would you consider yourself to be in good health?  Yes  No – explain \_\_\_\_\_

Any other illnesses or conditions we should know of? \_\_\_\_\_  
\_\_\_\_\_

Are you taking any medication at present?  No  Yes (specify) \_\_\_\_\_

Do you have any handicaps, or health conditions which require special attention, housing or dietary needs?

No  Yes (specify) \_\_\_\_\_

## Expectations (please use additional paper)

How did you first hear of Youth With A Mission, Skjærgårdsheimen, Norway?

What are your reasons for applying to this particular center?

How might you use your gifts and talents in Skjærgårdsheimen?

What expectations do you have for yourself at this point?

Briefly describe any experiences you have had in other cultures?

How do you think you would cope with small or shared living quarters and different foods?





## Financial Information

Family, friends and churches have pledged support for me amounting to  NOK / \$ /Euro per month

**NB! YWAM Norway requires a minimum of NOK 4.000,- for singles and NOK 8.000,- for couples in monthly support to be accepted as staff in Norway. But you have to increase your income if you plan to stay longerm. The Full Support program in YWAM Norway provides training in this matter.**

Do you currently have any outstanding debts or financial obligations to other YWAM bases/school?  Yes  No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

## Declaration

I commit myself to paying all expenses incurred during my involvement with YWAM/UofN at the Skjærgårdsheimen base

I have completed all portions of this application form and if accepted agree to abide by the spirit, policy and schedule of the center.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Day/Mo/Yr

## Release of Liability

I do understand that working in Youth with a Mission / UofN is to serve on voluntary terms. Hereby I release Youth with a Mission / UofN, its staff, agents, and volunteer assistants from any liability whatsoever arising out of an injury, theft, damage, disability or loss of health, property, emotional stability or life, which may be sustained by said person during the course of involvement with University of the Nations.

(As a registered worker with Ungdom i Oppdrag (UiO) / YWAM in Norway you will be covered by a general insurance concerning accidents in UiO / YWAM service.)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Day/Mo/Yr

## Release of Liability

This information will be treated according to Norwegian personalityrules.

I declare that I have read and understand YWAMs Privacy policy ([ywam.no/en/privacy-policy](http://ywam.no/en/privacy-policy))

**I certify that all information in this application is complete and accurate**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Day/Mo/Yr

**Please mail all forms to:**

Liv Ingrid Grøtnes (personal leader)  
Marianne/ Ståle Braseth

E-mail: [lig@heimen.org](mailto:lig@heimen.org)

E-mail: [Marianne.braseth@heimen.org](mailto:Marianne.braseth@heimen.org), [stale.braseth@heimen.org](mailto:stale.braseth@heimen.org)

Ungdom I Oppdrag Skjærgårdsveien 20, 4625 Flekkerøy, Norway

Phone: + 47 38 10 68 70 Norway

Web: [www.heimen.org](http://www.heimen.org)

