



### PERSONAL INFORMATION

Full Name M F Do you have a SS# Yes No  
 Preferred First Name Age Birth date  
 Home Address City State Zip  
 Mailing Address City State Zip  
 Home Phone Number Cell Phone Number  
 Marital Status Single Engaged Married Divorced  
 Primary Language Secondary Language  
 Are you a U.S. Citizen? Yes No INS Status

### EMERGENCY CONTACT INFORMATION

Contact Name Relationship to applicant  
 Home Address City State Zip  
 Mailing Address City State Zip  
 Home Phone Number Cell Phone Number

### EDUCATION

	Name of School	# of years attended	Graduation Date
High School			
College/Univ			
Institute			

### SPIRITUAL INFORMATION

When & where did you receive Jesus Christ as your personal savior?

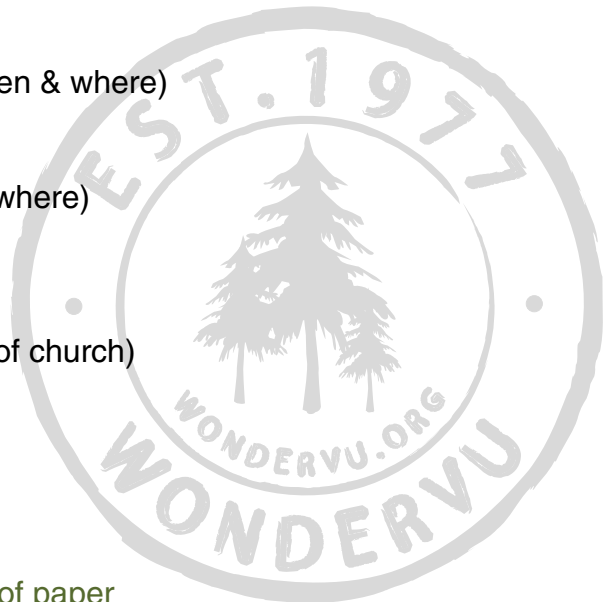
Have you been baptized in water? (If yes, when & where)

Have you been baptized with the Holy Spirit? (If yes, when & where)

Have you led a person to Jesus Christ? (If yes, when & where)

Do you attend church on a regular basis? (If yes, name of church)

Do you have a regular quiet time with the Lord?





### OUTREACH EXPERIENCE

Briefly describe in what ways you have been or are currently involved within your neighborhood, school and church.. (i.e. peer leadership, scouts, youth group, hospital visitation, Sunday school teacher, mission trips etc)

Briefly describe your future plans:

### PERSONAL REFERENCES

*One reference may be a parent or legal guardian*

Full Name

Mailing Address

City

State

Zip

Home Phone Number

Cell Phone Number

How does this person know the applicant?

How long has this person known the applicant?

What is the best way to contact this person? Telephone Mail

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### ADDITIONAL INFORMATION

Do you have a drivers license? Yes No Do you have your own car? Yes No

Do you have any vacation time planned with family this summer Yes No

If yes, what are the dates that you will need time off?

Are you CPR certified? Yes No Date/location of certification

Do you have lifeguard training? Yes No Date/location of training

Are you belay certified? Yes No Date/location of certification

Are you food handler certified? Yes No Date/location of certification

*I agree that the above information is true to the best of my knowledge & agree that upon the return of this completed application I agree to complete the interview process with Wondervu personnel with the intent of determining together if God is directing me to be an intern during the upcoming camp season.*

Applicant's Signature/if under 18, parent/legal guardian

Date

