

YWAM Davos
Landwasserstrasse46
7277 Davos Glaris
Switzerland

Tel +41 81 534 0457
Fax +41 81 534 4880
Email reg@ywamdavos.org
Web www.ywamdavos.org

**CARE SERVE
EMPOWER**
IN THE HEART OF THE SWISS ALPS



FORGE APPLICATION FORM

Please be open and honest in completing this form. This will help us get an accurate picture of you and how we can lead you best. All answers will be treated confidentially. If you have not completed a school with us within the past 4 years, please have a mentor, pastor or church leader fill in a reference form.

School Date:
(dd/mm/yyyy)

PERSONAL INFORMATION

First/Middle Name:

Date of Birth:
(dd/mm/yyyy)

Family Name:

Gender: Male Female

Full Address:

Nationality:

Country:

Marital Status : Single In a relationship

Telephone:

Engaged Married Divorced

Email:

Spouses name:

Married Since:

FINANCES

Do you have finances for the school? Yes No

If not, how much do you have, and how do you plan to raise the rest?

EXPERIENCE

Please describe any experiences with leadership you have had. (Christian and non-christian)

What occupational skills, passions, and hobbies do you have?

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YWAM INVOLVEMENT

Where did you do your DTS?

DTS Name and Year:

What is the most valuable transformation that happened for you during your DTS, and how has it impacted your life?

Have you been involved with YWAM outside of your DTS? Please explain.

PERSONAL CHARACTER

How do you see your personal relationship with God at the moment?

What would you consider three of your strengths?

What would you consider three areas of potential growth in your character?

What is your motivation and reasoning for applying to Forge?

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HEALTH

Do you have any health problems that we should know about? Anything that could hinder you from active involvement in volunteering is valid.

Please list any medications you take regularly.

Do you have any allergies or dietary preferences we should know about?

LEGAL

Medical and liability insurance is mandatory in Switzerland, so please ensure you have insurance for the duration of the school. Both your medical and liability must cover at least 1 million swiss francs.

Do you have insurance that meets these requirements? Yes No

Do you have a passport that is valid for 1 year after the start date of the school? Yes No

Emergency Contact

Name : Phone Number:

Relation to applicant: Email Address:

CHILD PROTECTION

We believe that all children have value, worth and dignity since they are created in the image of God. Therefore children should be cared for and treated with respect. In addition to our own children running around the base, you will come in contact with local kids during ministries and daily life. To minimize the risk of abuse, and to protect YWAM Davos and its members this is the protection system we have in place.

- We are a member of Mira, an organization in Switzerland to help prevent child abuse

- You will need to read and agree to our Child Protection Paper upon arrival

Have you ever been accused or convicted of any child abuse? (Physical, emotional, sexual) Yes No

- I will respect and protect the physical, psychological and sexual integrity of children, adolescents and adults. I will not tolerate boundary violations or any form of assault

- I will inform the responsible person of YWAM Davos when I have knowledge that the integrity of a child, adolescent or adult is at risk

- I will help to resolve any suspicion even if I am accused of any border violation or sexual assault

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DISCLAIMERS AND AGREEMENTS

Consent for Treatment - "Should a situation arise where I am sick or injured and urgently require medical attention, I give the base director, or his/her delegate the authority to make any decision concerning my immediate treatment, until I am able to make the next decision for myself. This includes anaesthetics, medications and operations as in the opinion of the attending physician deems necessary. I declare that the above named shall not be required to contact my next of kin to exercise his/her authority as provided herein. I declare that I shall not hold Youth With A Mission, the base leader, or his/her delegate liable for any decision made by him/her for any damage or loss that I sustain as a result of exercising the authority herein granted by me"

Waiver and Release of Liability- "I release Youth With a Mission, its agents, employees and volunteers assistants from any liability whatsoever arising out of injury, damage or loss which may be sustained by myself during the course of my involvement with Youth With a Mission."

Burial Statement- "In case of my death during the course of my involvement with Youth With a Mission, I wish that my next of kin be advised as soon as practical. Their wishes with regard to funeral and disposal of my body be complied with, as long as my next of kin places Youth With a Mission with sufficient funds to carry out those wishes. In the case where Youth With a Mission is unable to contact my next of kin, or that my next of kin is unwilling or unable to give to funeral and disposal of my body and come to a satisfactory arrangement with regard to payment of related costs within a reasonable time, then I direct that Youth With a Mission at its sole discretion make arrangements for funeral and disposal (including burial in a foreign country) at the expense of my estate."

Acknowledgment of Financial Responsibility- "I understand that payment of the required fees must be made in Swiss currency upon my arrival, unless otherwise approved in writing by the course director, before my departure for Switzerland. Outreach fees must be paid in total by 6 weeks ahead of departure."

Child Protection- "I understand the necessity of talking about this important topic. I agree to the three points mentioned in this application form and I will take part in internal discussions about this topic."

Community Living Standards- I confirm that I have read and understand the Community Living Standards stated in the Application Guide or on our website. During the period I am with YWAM Davos, I will keep the highest moral standard and maintain a clear personal witness through proper conduct. I understand that if I do not abide by these conditions, I may be asked to leave."

"I declare that all the information contained herein is true, correct and complete to the best of my knowledge"

I give YWAM Davos permission to use and store my data provided in this form for processing my application and precautionary purposes during my time at their schools."

Full Name:

Date:
(dd/mm/yyyy)

Signature: