

SERVE 2010

1. Personal Information

Name: _____ Gender: M/F
Address: _____
Contact No: _____ (H) _____ (HP)
Email: _____
Nationality: _____ Place of Birth: _____
Date of Birth: _____ Age: _____

2. Educational Background

Highest Standard Passed: _____ Year you left school: _____
School: _____

3. Church Affiliation

Name of Church: _____
Address: _____
Name of Pastor: _____
Email: _____ Contact No: _____

4. Christian Background

Year Becoming A Christian: _____ Year of Baptism: _____

List of church activities/ministries you are/have been involved in:-

Activities/Ministries	Role/Position	Duration
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Why did you choose to come for SERVE?

5. Medical History

Any past/present serious or major illnesses in the last 5 years?

Please specify if you are presently on any medication?

Please specify if you have suffered from any nervous disorder?

Please specify if you have any physical handicaps?

6. Parent/Guardian Consent

Name: _____ Signature: _____

Relationship to applicant: _____

Contact No: _____ (H) _____ (O) _____ (HP)

7. Pastor's Consent

Name: _____ Signature: _____

Contact No: _____

Church sponsoring towards applicant's monthly allowance? Yes / No