



EQUIP FOR LIFE

Head • Heart • Hands

Please complete this form fully.

THE INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.

APPLICATION CHECKLIST

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|--|---|
| <ul style="list-style-type: none"> Section 1 - Personal Details Section 2 - Parent / Guardian / Emergency Contact Section 3 - Fee-Payer Information Section 4 - Employment History Section 5 - Education Section 6 - Church Information Section 7 - Life Experience | <ul style="list-style-type: none"> Section 8 - Personal Statement Section 9 - References Section 10 - Health Section 11 - Programme Fees and Declaration Section 12 - Applicant Declaration <p>Reference's have all relevant info?</p> |
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Section 1 Personal Details

Last Name: **First Name:**

Address:

Postcode:

Birth Date

Contact N^o:

E-mail address:

Are You Married?

Do you possess a valid passport?

What career or study field/s are you interested in?

If you are successful you will be required to provide relevant evidence of the above details prior to your acceptance.

Section 2 Parent / Guardian / Emergency Contact

Relationship to Applicant

Last Name:

First Name:

Address:

Postcode:

Home Contact N°:

Mobile Contact N°:

E-mail address:

Section 3 Fee-Payer Information (if different to above)

Relationship to Applicant

Last Name:

First Name:

Address:

Postcode:

Home Contact N°:

Mobile Contact N°:

E-mail address:

Current Occupation

Section 4 Employment Information

Please check your present occupation and fill out relevant information below.

High School		Tertiary Education		Working		Unemployed		Other (please specify)	
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Current Employment (if applicable)

Name of Employer:

Job Title:

Date of Appointment: **Full / Part Time:**

Brief description of duties:

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Continue on a separate sheet if necessary

Previous Employment (if applicable)

Name of Employer:	Job Title	Job Description	Dates at Job

Section 5 Education

Qualifications obtained from Schools, Colleges and Universities. Please list the highest qualification first:

College or University	Years Attended	Qualifications and grades obtained
High School	Years Attended	Qualifications and grades obtained

Additional Training / Qualifications (please list any additional education)

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Continue on a separate sheet if necessary

Section 6 Church Information

Are you a member / attendee of a church?

Yes

No

Church Name and Affiliation	
Church Leader and Title	
Church Address	
Who would you like us to contact as a reference from your church?	
Reference Email	
Reference Contact Number	

Section 7 Life Experience

Please answer the following questions briefly and honestly. Reminder: all the information you provide on this form is confidential.

Are you a born-again Christian?

Yes

No

If yes, when did you give your life to Christ? Please describe your current relationship with God.
If no, what has your experience with Christianity, the Church and the Bible been?

Do you have any leadership experience?

Yes

No

If yes, please describe the context of your leadership and responsibilities?
How has your experience left you feeling about leadership in general?

Were your plans disrupted by the 2020 lockdown and pandemic? Yes No

If yes, how? And how did you change or grow from the experience?

Do you engage in smoking, drinking alcohol or other substance use? Yes No

If yes, please detail which and the frequency with which you do so?

Have you ever been arrested or involved in / convicted of a criminal offence? Yes No

If yes, please describe the events and the outcome thereof.

Have you ever received written warning or had any disciplinary action taken against you with regard to your behavior or treatment of others by any organization, leader, employer or church? Yes No

If yes, please detail.

Are you currently/have you recently been seeing a psychologist or therapist? Yes No

Do you take prescription medication for your mental health? Yes No

Do you currently or have you ever struggled with serious depression, anxiety, panic attacks, suicidal thoughts or other? Yes No

If yes, please detail.

How did you find out about Equip For Life and what is your main reason for applying?

Section 8 Personal Statement

Please use this section to list your **interests, hobbies** and **talents**. Also let us know why you would like to join Equip For Life and what you hope to gain from the year. Attach and label any additional sheets used.

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Continue on a separate sheet if necessary

Section 9 Health

Successful applicants will be required to complete a detailed medical questionnaire, including allergies, dietary restrictions and medical conditions.

Do you have a disability which is relevant to your application?

Yes

No

If yes, please give details and express whether we need to make specific arrangements for the interview.

We will try to provide access, equipment or other practical support to ensure that people with disabilities can engage fully in the programme.

Section 10 References

Each applicant requires two confidential written references. Reference letters should be sent directly to EFL via email or hardcopy. Please ensure your referees have the relevant information to do so.

Please clearly outline who your references are below.

Reference 1

Name:

Position (job title):

Relationship to applicant:

Organisation:

Current City:

Contact N^o:

E-mail:

Reference 2

Name:

Position (job title):

Relationship to applicant:

Organisation:

Current City:

Contact N^o:

E-mail:

Are you willing for this reference to be approached prior to the interview?

Yes

No

Are you willing for this reference to be approached prior to the interview?

Yes

No

Section 11 Programme Fees and Declaration

Fee Includes:

- Orientation
- EFL Courses
- Administrative Fee
- Resource Fee
- Retreat
- EFL T-Shirt

Fee Excludes:

- Accommodation
- Food
- Travel expenses
- Personal items and toiletries
- Medical expenses
- Personal insurance or insurance on personal valuables (cell phones, laptops, cars etc.)
- Optional Study tuition (dependent on students' choice of institution and courses-may include registration fees)
- Optional event fees (other events, camps and conferences may be attended during the year that are not covered by the fees but would be of great value to attend if chosen)
- Optional Upskill costs (learners/driver's license)
- Compulsory Lesotho Mission Trip attendance (R3,000.00)
- Compulsory Camp attendance (R1,000.00)
- Compulsory Holiday Club attendance (R270.00)
- Compulsory Freedom Course attendance (R150.00)

All Fees must be paid in SOUTH AFRICAN RANDS and is payable via direct bank transfer (EFT). Banking details available at www.theassembly.org.za and at bottom of form.

If your application is successful, you will receive an offer to join EFL via email provided.

R800.00 is due by the first of the month every month for the duration of the course.

The course runs for 10 months from 1 February to 30 November 2022. The additional compulsory event attendance fees will be due at the event specific deadlines through the year.

Fee-Payer (hereby commits to financial responsibility for EFL programme fees should the applicant be successful and accept an offer for a place at EFL in 2022)

Signature:

Print Name:

Date:

Section 12 Applicant Declaration

A. Liability Release and Consent for Treatment

Any activity, transport, event or other are participated in at the discretion of the student and at their own risk. In the event of damage to / loss of personal property or personal injury, I hereby release the EFL Leadership and Assembly Church of any liability. I consent to any medical treatment or intervention should I be incapacitated and as such is deemed necessary by medical health professionals. In the event that my emergency contacts are unreachable due to extenuating circumstances I give permission to Equip For Life to act in my best interests and recognize that emergency situation standard operating procedure is the preservation of life.

Signed:

Date:

B. Commitment to Equip For Life

If accepted to the programme I commit to abiding by the code of conduct for students in the programme and submit to the EFL and Assembly Church leadership and those in a position of authority. I commit to participation in all aspects of the programme schedule and training. I have read and understand the financial declaration and commit to ensure my fees are paid and understand that there are additional expenses that are for my own account. I understand that Equip For Life and Assembly Church reserve the right to expel me from the programme and/or limit my involvement with immediate effect if fees are in arrears or my conduct is in conflict with the values and/or good running of the programme. I recognize that should I be expelled or decide to leave the programme for reasons within my control I may still be liable for the programme fees.

Signed:

Date:

C. Statement to be Signed by the Applicant

EFL is committed to its values of integrity and honesty and the safety of its students.

Please complete the following declaration and sign it in the appropriate place below. If this declaration is not completed and signed, your application will not be considered.

I hereby give consent to such collection, storage and processing of my personal data for the purposes of reviewing the application and conducting a future interview. I agree that the information given on this form may be stored on file should my application be successful or not.

I hereby certify that:

- all the information given by me on this form is correct to the best of my knowledge
- all questions relating to me have been accurately and fully answered
- I possess all the qualifications which I claim to hold
- I have read and, if accepted, am prepared to accept the conditions set out and submit to the leadership of EFL.

Signed:

Date:

(NB. Candidates selected for interview will be notified. Unsuccessful applicants will be informed of such within a month of submission of this form. Thank you for your interest in EFL. We look forward to reviewing your application)

Equip For Life undertakes that it will treat any personal information (that is data from which you can be identified, such as your name, address, e-mail address etc) that you provide to us, or that we obtain from you, in a confidential manner.

RETURNING THIS FORM

By Hand or Post:

Assembly Cafe'
60 Caledon Street
Graaff-Reinet 6280
Monday to Friday: 9am-3pm

By E-Mail:

efl@theassembly.org.za

Enquiries:

Telephone: 083 655 6983

Banking/EFT Details:

Assembly Church
Standard Bank
Graaff-Reinet (050 116)
Account no: 082 520 607
Reference: EFL "Surname"