

**APPLICATION FORM**

Please return completed forms along with \$15.00 non-refundable application fee to:

LIGHT International  
PO Box 39267  
Fort Lauderdale, FL 33339

First Name:		Last Name:		Occupation:	
Permanent Address:				Date of Birth:	
				Sex:    Male                      Female	
Home Phone:		Work/Cell Phone		Social Security Number:	
Email:		Best time to reach you for a phone interview:			
Passport Number:		Place of issue:	Date of issue:	Date of expiration:	
T-Shirt Size: S M L XL XXL		Height:	Weight:	Marital Status:	
Emergency Contact: (relationship, full name, address and phone number)					
Session Choice (please rank your preference):					
1.		2.		3.	
Medical History: Please state any known allergies, including food allergies, medications you are currently taking or have taken in the last year, any physical disabilities or any other pertinent medical information. Use the other side of the form to elaborate if necessary.					
I, the undersigned, hereby acknowledge that the information provided on this application form is true. I have read, fully understand and accept the general conditions set out by Expedition in the terms and conditions and assumption of risk forms					
Signature: _____ Date: _____					
Parent's Signature(If under 18): _____				Date: _____	
How did you hear about EHI?				Attach photo here	
Indicate any foreign languages and your proficiency in them:					
Are you qualified in any areas of skilled labor or trade? If yes, please explain. (Use other side if necessary)					



Are you struggling with any particular problems or issues that would inhibit your ability to minister as a part of EHI? If yes, please explain.

Are you prepared for the physical, spiritual and emotional discomforts you may experience during EHI? If so, how have you prepared?

Is there anything else you would like us to know about you?

Previous Practical Experience: (Please Check Each That Apply)

- Praise & Worship Leader
- Guitar or other instrument (list) \_\_\_\_\_
- Preaching
- Street Witnessing
- Child Evangelism
- Drama
- Sunday School Teacher: Children\_\_\_ Youth\_\_\_
- Carpenter/Maintenance/Electrician/Plumber/etc. \_\_\_\_\_
- Prison Ministry
- Prayer Leader
- Bible Study or Home Group Leader
- Photographer
- Medical Experience \_\_\_\_\_
- Other: \_\_\_\_\_

# Pastor's Approval

Please help us with the preparations for the upcoming Eleventh Hour Intensive by giving us your personal recommendations for the following prospective intern. Please return this form directly to EHI at: PO Box 2309, Fort Lauderdale, FL 33303. Feel free to contact us by phone at (954) 340-7047 if you have any questions. Thank you for your help.

Applicants Name:

EHI Session:

Church:

Church Address:

Church Phone Number:

How long have you known this individual?

Please explain how this individual has been active and faithful in service to your ministry:

I recommend this candidate:

\_\_\_\_\_ Without Reservation

\_\_\_\_\_ With Reservation

\_\_\_\_\_ Cannot Recommend at this Time

Comments: (Use reverse if necessary)

Pastor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_