Jamaica Relief Ministries

Application Form

1. NAME: _____
   (Last) (First) (Middle)
   Address _____E-mail_____
   City_____ State _____ Zip _____
   Telephone (___) _____ Social Security Number ___ - ___ - ___
   Date of Birth _____ Place of Birth _____
   Father's Name _____ Mother's Name _____
   General Condition of Health: Fair _____ Average _____ Above Average _____
   Church Affiliation: _____ Name of Pastor _____
2. I have completed _____ years of elementary school at _____
   I have completed _____ years of high school at _____
   If you do not have a high school diploma would you consent to getting a G.E.D.?
3. _____.
4. List any college you have attended and your major. _____
   _____
5. What have you done during summer months from high school to present?_____
   _____
6. _____
7. Have you ever traveled outside of the US or Canada and if so for what purpose?
   _____
   _____
8. _____
9. Have you had any special training or experiences pertaining to child care activities and/or individual counseling? _____
   _____
10. Other experiences with children _____
    _____
11. List any special abilities, hobbies or interest. _____
    _____
12. Have you had any training in CPR and/or First Aid? _____
13. If accepted, will you submit to a pre-employment physical?_____
14. If accepted, when could you begin work? _____
15. If accepted, would you consider a commitment of _____1 year _____ 18 months 2 years_____ Longer?

16. REFERENCES:
    Minister _____ Address _____
    Telephone _____ _____

    Name _____ Address _____
    Telephone _____ _____

Name _____ Address _____
Telephone _____ _____

Name _____ Address _____
Telephone _____ _____

17. How did you find out about the Jamaica Relief Ministry? _____
18. Have you had a conscious experience of the new birth? _____
19. How long have you been a Christian? _____
20. What do you depend on to keep in fellowship and in tune with God? _____
_____
_____
21. What is your goal in life? _____
_____
22. How do you think the Jamaica Relief Ministry will help reach that goal? _____
_____
23. Give a developmental history of yourself. Include number of siblings and your relationship to them in terms of age and emotional closeness. Describe your relationship with your father and mother, your description of any other relationships that are significant in your life i.e. employer, girlfriend, boyfriend, etc. Give your personal testimony and how it relates to your life purpose and goals.
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
Attach another page if you need more room.

24. Please enclose a recent photograph of yourself.

25. Signature _____ Date _____

Please return to
Floyd Yoder
9496 S. Hwy 11
Westminster, S.C. 29693
floydyoder19@msn.com