



GOT Ministries Student Application

Date of Application: _____

Name _____

Address _____

Phone Number (_____) _____ DOB: ____/____/____

School _____ Program _____

Fieldwork Coordinator: _____ Phone: _____

Expected Graduation Date _____

Indicate preferred field work experience: _____ 6 weeks _____ 12 weeks _____ DEC

Passport Number: _____ Expiration Date: _____

Emergency Contact: _____

Phone: _____ Relation: _____

How many years have you studied Spanish? _____

What level of proficiency would you consider your speaking capacity? _____

References:

Professional

Name _____ Email _____

Spiritual

Name _____ Email _____

Character

Name _____ Email _____



Essay Questions:

(Please keep your answers concise to one paragraph maximum.)

1. What do you expect to get out of this experience?
2. Have you had a unique cultural experience? if so, please explain.
If not, describe how you will prepare yourself to interact in this experience

Payment Information:

50% of total fee is required two months prior to date of departure.

100% of total fee is required one month prior to date of departure.

No refunds after contract signed and flight purchased; except for the loss of immediate family (mother, father, siblings).

Acknowledgment

I agree to abide by the guidelines set in the orientation manual which will be provided upon acceptance into GOT Ministries.

Signature

Date