



INTERNATIONAL
HOUSE of PRAYER
UNIVERSITY

Internship Application

Application Components

The application has several components, which must all be sent together in one packet. Admissions decisions will not be made until we receive your *complete* application.

1. Application form, completed and signed
2. Current, personal photograph attached to the application
3. Personal testimony typed on a separate sheet; no more than two pages
4. Completed, pastoral recommendation in a sealed and signed envelope
5. Completed, personal recommendation in a sealed and signed envelope
6. Non-refundable application fee per applicant to internship; make checks payable to IHOPU with the applicant's name in the memo
7. All applicants (except applicants to Simeon Company) must submit high school/secondary school transcripts (or official GED copies)
8. Internship addendum, completed and signed

Applications must be received no later than two weeks prior to the internship start date.

International Applicants

If you are an international applicant (any applicant who is not a US citizen, a US national, or a US legal permanent resident), you must also submit the following:

1. Affidavit of Financial Support
2. Bank statement dated within the last six months
3. Photocopy of your passport
4. TOEFL score (if required)

For more information, please visit ihopkc.org/ihopuinternational.

Mailing Address

Admissions
International House of Prayer University
12901 S. US Highway 71
Grandview, MO 64030

Application Process

1. We will contact you to let you know we have received your application, and to arrange a phone interview.
2. We will generally notify you of your acceptance or denial within thirty days of your phone interview.
3. Applicants are not accepted to any IHOPU internship until they have received an official notification of acceptance from the IHOPU Admissions office.
4. Accepted interns will receive further instructions by email from IHOPU.
5. Please email admissions@ihopu.org or call Admissions at (816) 763-0200 x.7150 if you have any questions during the application process.

I am applying for:

- Intro to IHOPKC January May September 20_____
- One Thing Internship January July 20_____
- Fire in the Night January April July September 20_____
- Simeon Company January April July October 20_____

Personal Information

Date of application (MM/DD/YY) ____/____/____

Last/family name _____

First/given name _____

Middle name _____

Address _____

City _____

State/province _____ Zip/postal code _____

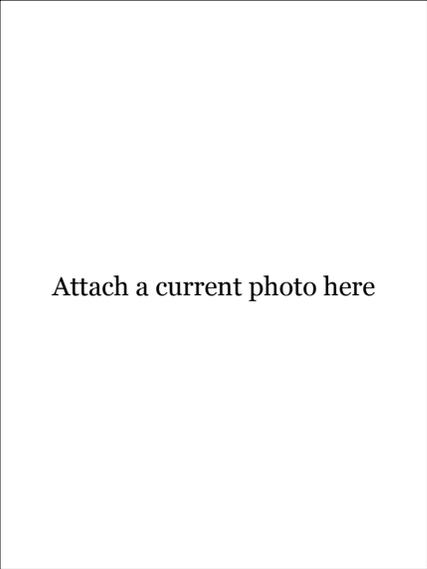
Country _____

Phone _____

Email _____

Gender Male Female

Date of birth (MM/DD/YYYY) ____/____/_____



Legal Status

Please check the box that applies to you.

- U.S. citizen/national
- U.S. legal permanent resident (submit a photocopy of your permanent resident card)
- International applicant (any applicant who is not a U.S. citizen, a U.S. national, or a U.S. legal permanent resident)

If you are in the US, what type of visa do you have? _____

Country of citizenship _____ Country of birth _____

Language

Is English your first language? Yes No If no, what is? _____

The Test of English as a Foreign Language (TOEFL) is required of all students whose first language is not English. IHOPU applicants must have a minimum TOEFL score of 70 on the internet-based test, or 523 on the paper-based test. IHOPU's school code is 4247. Applicants without a TOEFL score will be considered for admission if they can provide proof of two years of full-time study in a program with instruction completely in English.

Test date (if applicable) ____/____/____ Score _____

Family Information

Marital status; check all that apply. Single Engaged Married Widowed

Separated* Divorced** Remarried**

*If you are married but separated (i.e., not reconciled, or with a divorce finalization pending), your application for IHOPU will still be considered. Since marital situations vary, applications will be reviewed on a case-by-case basis. Please provide a brief explanation of your “separated” marital status.

**If you have been divorced, or divorced and remarried (except in the case of widow or widower), we realize that these circumstances have a significant impact on your life. Therefore, we respectfully ask that you submit the following:

1. An explanation of the general circumstances of the divorce, including whether or not reconciliation and/or counseling were sought (approximately 300 words)
2. Your view of what the Bible says about divorce and remarriage (approximately 300 words)

If you are married and/or will have children with you under the age of 18, please answer the following questions.

Spouse’s name _____ Age _____ How long have you been married? _____

Is your spouse attending IHOPU? Yes No If yes, your spouse must complete a separate application and submit it with yours. If no, your spouse will be asked to fill out a Spousal Consent Form that will be sent by the Admissions office when your application is received.

Do you have children under 18 accompanying you to/in Kansas City? Yes No
If yes, how many? _____

Education Background

Please indicate the highest level of education you have completed.

- Senior high/secondary school diploma GED or equivalent Vocational school
 College/university undergraduate degree Graduate degree Postgraduate degree

List senior high/secondary school and institutions of higher education you have attended, beginning with the most recent.

School name	City, state	Dates attended	Diploma, degree
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been dismissed from any school for any reason? Yes No If yes, please explain.
Use a separate sheet of paper if necessary.

Employment

If currently employed, please indicate your position _____

Dates of employment (MM/YY) ____/____ to ____/____

Name of company _____

What business, occupational, or military experience have you had in the past? Please state the nature of the work, name of the organization, and the dates you were involved. Use additional paper if necessary.

Personal Faith and Testimony

Have you accepted Jesus Christ as your Savior? Yes No If yes, please explain with scriptures and dates (if known).

Please write your personal testimony in a separate typed document. Include the following points:

1. A summary of your personal journey in Christ
2. Any past or present life-controlling issues, whether mental, emotional, or relational
3. Your goals for the future, including your life vision and ministry plans
4. Expectations for your time at IHOPU and a summary of what you hope to learn at IHOPU

Church Background

Are you involved in a local church? Yes No If no, please explain on a separate sheet of paper. If no, have you been involved in a church in the past? Yes No

List church involvement, beginning with the most recent.

<i>Church name</i>	<i>City/state</i>	<i>Dates</i>	<i>Senior pastor</i>
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Attended Regularly Occasionally

Attended Regularly Occasionally

Describe how your church or spiritual family feels about your time as an IHOPU intern.

Personal Evaluation

What do you consider to be your talents, gifts, and strengths?

What do you consider to be your weaknesses or struggles?

Interest in IHOPU

How did you hear about IHOPU? Check all that apply:

IHOPKC conference in Kansas City: _____

something regional conference: _____

Awakening Teen Camp YouTube

Christian event featuring IHOPKC speaker/worship leader

Current or former IHOPU student or intern Charisma magazine ad

Friend or family member Charisma website ad

Pastor Relevant magazine ad

- IHOPKC website
- Facebook
- Twitter

- Relevant website ad
- Other ad, please specify _____
- Other, please specify _____

What aspect of the International House of Prayer of Kansas City interests you the most?

What led you to apply to IHOPU?

Have you applied for or attended any program at IHOPU in the past? Yes No
If yes, list which programs, the dates you applied or attended.

Financial Information

What is your plan for paying tuition?

Do you have any financial debt? Yes No If yes, please explain the type and amount of debt incurred and your plans for managing it if accepted into IHOPU.

Health Information

Do you have any disabilities, illnesses, or conditions—mental or physical—that may affect your performance? Yes No If yes, please explain.

Do you have any physical disabilities or conditions that require special care? Yes No If yes, please explain.

Do you have any substance abuse problems or addictions? Yes No If yes, please explain.

Do you currently have, or have you ever had, any life-controlling mental, emotional, or relational issues? Yes No If yes, please explain. Use a separate sheet of paper if necessary.

Have you ever received help for psychological, sexual, emotional, or relational problems?

Yes No If yes, please provide details below.

Date	Caregiver(s)/program(s)	Identified problem(s)	Was treatment voluntary?
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___/___/___	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
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___/___/___	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you ever been accused of and/or reported for physically or sexually abusing someone?

Yes No If yes, provide details and circumstances of accusations/reports of abuse on a separate sheet.

Do you have a police record? Yes No If yes, please explain on a separate sheet.

Have you ever attempted or considered suicide? Yes No If yes, please explain the circumstances. Include when, where, and how you were treated and whether treatment was voluntary or involuntary.

Do you have suicidal thoughts? Yes No If yes, please describe.

Have you ever viewed child pornography? Yes No If yes, please explain the circumstances, including dates.

Have you taken or been prescribed medication related to psychological problems in the past?

Yes No If yes, please list your medications and describe your treatment methods.

Do you have a prescription for medication related to psychological problems? Yes No

If yes, you will be asked to list medications in the medication disclosure below.

If yes, are you taking this medication? Yes No If no, explain.

Are you currently taking any other prescription medications? Yes No If yes, you will be asked to list medications in the medication disclosure below.

List all medications prescribed to you and the name and phone number of the doctor who prescribed and regulates it.

Medication	Doctor's name	Doctor's phone number
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I agree to continue taking these medications under the supervision of my doctor throughout my time at IHOPU. I understand that failure to keep taking my medications under my doctor's care is grounds for my immediate dismissal.

Name in print _____ Date (MM/DD/YY) ___/___/___

Signature _____

Dating Policy

Dating and courting are not permitted during the One Thing, Fire in the Night, and Hope City internships. They are not permitted during the first track of Intro to IHOPKC and Simeon Company. However, interns in a relationship before beginning the internship may communicate through written communication only. If the dating relationship is with someone living in the Kansas City area, this must be disclosed on the application form. Applicants who are engaged should disclose this on the application form as well.

Are you currently in a dating relationship? Yes No

Are you engaged? Yes No

Does this person live in the Kansas City area? Yes No

Acknowledgment of Agreement

- I have read, agree with, and will abide by the Dating Policy.
- I have read, agree with, and will abide by the IHOPKC Internship Guidelines.
- I have read the IHOPKC Statement of Faith.*
- I declare that the information I have provided in my application is true, accurate, and complete.
- I understand that providing false information in my application may be grounds for denial of my application and/or dismissal from IHOPU.

Name in print _____ Date (MM/DD/YY) ___/___/___

*If you disagree with any section of the IHOPKC Statement of Faith, please explain on a separate sheet of paper.

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IHOPU Internship Guidelines

Teachability. We ask that every intern be teachable, willing to learn, and sincere in his or her pursuit of holiness.

Dating. We ask that interns not date/court during One Thing Internship, Fire in the Night, and the first track of Intro to IHOPKC and Simeon Company. However, interns in a relationship before beginning the internship (whether dating, courting, or engaged) may continue in the relationship, but we ask that it be through written communication only.

The purpose of our internships is focused pursuit of the Lord. We are confident that when interns separate themselves for this short season, they will find that the reward far outweighs the sacrifice. We recommend that applicants who are engaged attend an internship after they are married.

Vacation. We ask that interns not take personal breaks during the internship. Interns should plan ahead and keep the internship a focused season to seek the Lord.

Personal appearance. Interns are expected to uphold a clean, modest, and non-distracting appearance in their dress for all meetings, classes, services, and gatherings throughout the International House of Prayer community. We desire to bring glory to Jesus with our bodies and clothing. We also ask that clean, untorn clothing and shoes be worn when on any ministry platform at the International House of Prayer.

Health insurance. Applicants should provide their own health insurance coverage. Neither IHOPU nor the internship program are responsible for covering hospitalization, visits to the doctor, or medications.

Vehicle. Interns are responsible for their own transportation and timeliness (i.e., they must be punctual for meetings and classes) whether they have a vehicle or not.

Personal expenditures. Interns are required to have sufficient funds to cover all personal and living expenses incurred throughout the internship. Due to the extensive time commitments during the program, it is recommended that interns not acquire outside employment.

International House of Prayer Statement of Faith

The Word of God

We believe that only the sixty-six books of the Bible are the inspired and, therefore, inerrant Word of God. The Bible is the final authority for all we believe and how we are to live. (Mt. 5:18; Jn. 10:35; 17:17; 2 Tim. 3:16–17; 2 Pet. 1:20–21)

The Trinity

We believe that the one true God exists eternally in three persons—Father, Son, and Holy Spirit—and that these, being one God, are equal in deity, power, and glory. God is infinite in love, perfect in judgments, and unchanging in righteousness and mercy. We believe that God not only created the world, but also now upholds, sustains, governs, and providentially directs all that exists, and that He will bring all things to their proper consummation in Christ Jesus, to the glory of His name. (Ps. 104:1–35; 139:1–24; Mt. 10:29–31; 28:19; Acts 17:24–28; 2 Cor. 13:14; Eph. 1:9–12; 4:4–6; Col. 1:16–17; Heb. 1:1–3; Rev. 1:4–6)

God the Father

We believe the heavenly Father is the source of all that exists, whether of matter or spirit. With the Son and the Holy Spirit, He made man, male and female, in His image. By intention He relates to people as Father, thereby forever declaring His goodwill toward them. In love He both seeks and receives penitent sinners. (Ps. 68:5; Isa. 64:8; Mt. 5:45; 7:11; Jn. 3:17; Rom. 8:15; 1 Pet. 1:17)

God the Son

We believe that Jesus of Nazareth is the Christ (Messiah), the Son of God; that He is God incarnate,

fully God and fully man; that He was eternally preexistent with the Father and the Holy Spirit; and that He was conceived and born of a virgin, lived a sinless life, and offered Himself as a penal, substitutionary sacrifice for sinners. By His blood shed at the cross, He obtained for us eternal redemption, the forgiveness of sins and life everlasting. He was raised bodily on the third day and ascended to the right hand of the Father, there to make intercession for the saints forever. He will return to earth again to reign in righteousness. (Mt. 1:18–25; Jn. 1:1–18; Rom. 8:34; 1 Cor. 15:1–28; 2 Cor. 5:21; Gal. 3:10–14; Eph. 1:7; Phil. 2:6–11; Col. 1:15–23; Heb. 7:25; 9:13–15; 10:19; 1 Pet. 2:21–25; 1 Jn. 2:1–2)

God the Holy Spirit

We believe that the Lord Jesus Christ baptizes believers in the Holy Spirit, in whom we are also sealed for the day of redemption. The Holy Spirit regenerates, forever indwells, and graciously equips the Christian for godly living and service. Subsequent to conversion, the Spirit desires to fill, empower, and anoint believers for ministry and witness. We also believe that signs and wonders, as well as all the gifts of the Spirit described in the New Testament, are operative today and are designed to testify to the presence of the kingdom and to empower and edify the Church to fulfill its calling and mission. (Mt. 3:11; Jn. 1:12–13; 3:1–15; Acts 4:29–30; Rom. 8:9; 12:3–8; 1 Cor. 12:12–13; 2 Cor. 1:21–22; Gal. 3:1–5; Eph. 1:13–14; 5:18)

Salvation

We believe that salvation is by grace alone, through faith alone, in Christ alone. No ordinance, ritual, work or any other activity on the part of man is required or accepted for his salvation. This saving grace of God, through the power of the Holy Spirit, also sanctifies us by enabling us to do what is pleasing in God's sight, that we might be progressively conformed to the image of Christ. (Jn. 1:12–13; 6:37–44; 10:25–30; Acts 16:30–31; Rom. 3:1–4:23, 8:1–17, 31–39; 10:8–10; Eph. 2:8–10; Phil. 2:12–13; Titus 3:3–7; 1 Jn. 1:7, 9)

Evil

We believe that Satan, originally a great and good angel, rebelled against God, taking a multitude of angels with him. He was cast out of God's presence and is at work with his demonic hosts to establish his counter-kingdom of darkness, evil, and unrest on earth. Satan was judged and defeated at the cross of Christ and will be cast forever into the lake of fire which has been prepared for him and his angels. (Isa. 14:10–17; Ezek. 28:11–19; Mt. 12:25–29; 25:41; Jn. 12:31; 16:11; Eph. 6:10–20; Col. 2:15; 2 Pet. 2:4; Jude 6; Rev. 12:7–9; 20:10)

Humanity

We believe that humanity, male and female, was originally created in the image of God, righteous and without sin. As a consequence of disobedience, all persons are sinners by both nature and choice, and are, therefore, spiritually dead and justly condemned as children of wrath in the sight of God, wholly unable to save themselves. (Gen. 1:1–3:22; Ps. 51:5; Isa. 53:5; Rom. 3:9–18; 5:12–21; Eph. 2:1–3)

The Church

We believe that the Church is God's primary instrument, through which He is fulfilling His redemptive purposes in the earth. To equip the saints for the work of ministry, God has given the Church apostles, prophets, evangelists, pastors, and teachers. We also affirm the priesthood of all believers and the importance of every Christian being joined with and actively involved in a local community of the saints. We believe women, no less than men, are called and gifted to proclaim the gospel and do all the works of the kingdom. (Mt. 16:17–19; Acts 2:17–18, 42; Eph. 3:14–21; 4:11–16; 1 Tim. 2:11–15; Heb. 10:23–25; 1 Pet. 2:4–5, 9–10)

Sacraments

We believe that water baptism and the Lord's Supper are the two ordinances of the Church, to be observed until the time of Christ's return. They are not a means of salvation, but are channels of God's sanctifying grace and blessing to the faithful in Christ Jesus. (Mt. 26:26–29; 28:19; Rom. 6:3–11; 1 Cor. 11:23–34; 1 Pet. 3:21)

Missions and Service

We believe that God has called the Church to work together in unity and honor in preaching the gospel to all nations, in making disciples, and in remembering the poor and ministering to their needs through sacrificial giving and practical service. This ministry is an expression of the heart of the Lord Jesus Christ and is an essential part of the kingdom of God. (Isa. 58:6–12; 61:1; Mt. 5:1–7:28; 28:18–20; Lk. 4:18; 21:1–4; Gal. 2:10; 1 Tim. 6:8)

Last Things (Historic premillennialism with a victorious Church)

We believe in the literal second coming of Christ at the end of this age, when He will return to earth personally and visibly to reign over the nations in His millennial kingdom. We believe that the Church will go through the Great Tribulation with great power and victory and will only be raptured at the end of the Great Tribulation. We also believe in and are praying for a great end-time harvest of souls and the emergence of a victorious Church that will experience an unprecedented unity, purity, and power in the Holy Spirit. (Ps. 2:7–9; 22:27–28; Jn. 14:12; 17:20–26; Rom. 11:25–32; 1 Cor. 15:20–28, 50–58; Eph. 4:11–16; Phil. 3:20–21; 1 Thes. 4:13–5:11; 2 Thes. 1:3–12; Rev. 7:9–14)

Eternal Reward and Punishment

We believe that when Christians die, they pass immediately into the blessed presence of Christ, there to enjoy conscious fellowship with the Savior until the day of the resurrection and the glorious transformation of their bodies. The saved will receive eternal rewards and forever dwell in blissful fellowship with their great triune God. We also believe that when unbelievers die, they are consigned to hell, there to await the Day of Judgment when they shall be punished in the lake of fire with eternal, conscious, and tormented separation from the presence of God. (Dan. 12:2; Mt. 25:46; Lk. 16:19–31; Jn. 5:25–29; 1 Cor. 15:35–58; 2 Cor. 5:1–10; Phil. 1:19–26; 3:20–21; 2 Thes. 1:5–10; Rev. 20:11–15; 21:1–22:15)

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Application Fee

The application fee for all internships is \$50. Application fees are nonrefundable.

Please print.

Applicant name _____

Internship Intro to IHOPKC One Thing Internship Fire in the Night
 Simeon Company

Start date January April May July September October 20_____

Payment Options

Payment must be made in US dollars.

1. Make a check or money order payable to International House of Prayer University. Write the applicant's name and school/internship in the memo. Attach to this document.
2. Complete the credit card information below.

Check the box that applies.

Visa MasterCard Discover American Express

Cardholder's name as it appears on the card (please print) _____

Credit card number _____

Billing zip code (US cards only) _____ Expiration date ____/____/____

Security code (3-digit code on back of card, or 4-digit code on front of card) _____

Signature _____ Date (MM/DD/YY) ____/____/____

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UNIVERSITY

Pastoral Recommendation Form

TO BE COMPLETED BY THE APPLICANT

Name _____ Phone _____

IHOPU program and start date _____

Email _____

Under the Family Educational Rights and Privacy Act, students enrolled at IHOPU have the right to inspect their files upon request. In order for the person from whom you have requested this letter of reference to know if you will have access to this letter or if it will be held in confidence, please sign one of the statements below. Waiving your right to see this letter is not a requirement for admission.

Please check only one of the options below and sign and date your option.

I understand that students enrolled in IHOPU have the right to inspect their file upon request under the Family Educational Rights and Privacy Act. I, however, hereby DO WAIVE my right of access to this letter of reference.

Signature _____ Date (MM/DD/YY) ____/____/____

I DO NOT WAIVE my right of access to the letter of reference.

Signature _____ Date (MM/DD/YY) ____/____/____

TO BE COMPLETED BY THE PASTORAL REFEREE

The pastoral referee must be unrelated to the applicant and must have known the applicant for at least one year. Please return this form directly to the applicant in a sealed and signed envelope so that they may submit all components together in one packet.

If you have any questions, please email admissions@ihopu.org.

Name _____

Church name _____

Staff position _____ Church phone _____

Church address _____

City _____ State _____ Zip/postal code _____

Country _____ Contact phone _____

Email _____

1. How long have you known the applicant? How well do you know him/her?

2. Please describe the applicant's level of involvement in your church.

3. What is the applicant's effect on his/her peers?

4. Has the applicant served your congregation in any capacity? Yes No If yes, please give a brief description.

5. IHOPU programs consist of a heavy weekly schedule. Do you foresee difficulties for the applicant with a schedule combining high expectations and extensive time constraints?

6. What is your assessment of the applicant's ability to handle situations involving change, crisis, and correction?

7. From your observation, what are the strengths and spiritual gifts of the applicant?

8. From your observation, what are the applicant's weaknesses and struggles?

9. Are you aware of any complex family or relational factors that might affect the applicant's time at IHOPU?

Please assess the applicant in the following areas:

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual maturity	<input type="checkbox"/>				
Devotion to Jesus Christ	<input type="checkbox"/>				
Integrity and honesty	<input type="checkbox"/>				
Openness to correction	<input type="checkbox"/>				
Self-discipline	<input type="checkbox"/>				
Working without supervision	<input type="checkbox"/>				
Willingness to serve	<input type="checkbox"/>				
Ability to work with others	<input type="checkbox"/>				
Communication skills	<input type="checkbox"/>				
Leadership skills	<input type="checkbox"/>				
Reliability	<input type="checkbox"/>				
Teachability	<input type="checkbox"/>				
Emotional stability	<input type="checkbox"/>				
Physical health	<input type="checkbox"/>				
Family life	<input type="checkbox"/>				

Additional comments or explanations:

10. Would you have the applicant on your staff? Yes No Why or why not?

11. Do you recommend this applicant for IHOPU?

Highly recommend Recommend Recommend with reservations* Do not recommend*

*Please explain:

Additional comments:

Signature _____ Date (MM/DD/YY) ____/____/____

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INTERNATIONAL
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Personal Recommendation Form

TO BE COMPLETED BY THE APPLICANT

Name _____ Phone _____

IHOPU program and start date _____

Email _____

Under the Family Educational Rights and Privacy Act, students enrolled at IHOPU have the right to inspect their files upon request. In order for the person from whom you have requested this letter of reference to know if you will have access to this letter or if it will be held in confidence, please sign one of the statements below. Waiving your right to see this letter is not a requirement for admission.

Please check only one of the options below and sign and date your option.

I understand that students enrolled in IHOPU have the right to inspect their file upon request under the Family Educational Rights and Privacy Act. I, however, hereby DO WAIVE my right of access to this letter of reference.

Signature _____ Date (MM/DD/YY) ____/____/____

I DO NOT WAIVE my right of access to the letter of reference.

Signature _____ Date (MM/DD/YY) ____/____/____

TO BE COMPLETED BY THE PERSONAL REFEREE

The personal referee must be unrelated to the applicant and must have known the applicant for at least two years. Please return this form directly to the applicant in a sealed and signed envelope so that they may submit all components together in one packet.

If you have any questions, please email admissions@ihopu.org.

Name _____

Age _____ Phone _____

Address _____

City _____ State _____

Zip/postal code _____ Country _____

Email _____

1. How long have you known the applicant? How well do you know him/her?

2. What relationship do you have to the applicant?

3. Please describe your understanding of the applicant's intentions for his/her time as an IHOPU student or intern.

4. IHOPU programs consist of a heavy weekly schedule. Do you foresee difficulties for the applicant with a schedule combining high expectations and extensive time constraints?

5. From your observation, what are the strengths and spiritual gifts of the applicant?

6. From your observation, what are the applicant's weaknesses and struggles?

7. Are you aware of any complex family or relational factors which might affect the applicant's involvement at IHOPU?

Please assess the applicant in the following areas.

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual maturity	<input type="checkbox"/>				
Devotion to Jesus Christ	<input type="checkbox"/>				
Integrity and honesty	<input type="checkbox"/>				
Openness to correction	<input type="checkbox"/>				
Self-discipline	<input type="checkbox"/>				
Working without supervision	<input type="checkbox"/>				

Willingness to serve	<input type="checkbox"/>				
Ability to work with others	<input type="checkbox"/>				
Communication skills	<input type="checkbox"/>				
Leadership skills	<input type="checkbox"/>				
Reliability	<input type="checkbox"/>				
Teachability	<input type="checkbox"/>				
Emotional stability	<input type="checkbox"/>				
Physical health	<input type="checkbox"/>				
Family life	<input type="checkbox"/>				

Additional comments or explanations:

8. Do you recommend this applicant for IHOPU?

Highly recommend Recommend Recommend with reservations* Do not recommend*

*Please explain:

9. Do you support the applicant's decision to move to Kansas City as an IHOPU student or intern?

Yes No Why or why not?

Additional comments:

Signature _____ Date (MM/DD/YY) ____/____/____

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Internships Application Addendum

Finances

If you are applying for the One Thing Internship or Fire in the Night, program tuition includes three meals per day in the cafeteria and dorm-style housing. Beyond tuition, how will you provide for expenses such as laundry, phone service, personal supplies, and recreation?

If you are applying for Intro to IHOPKC or Simeon Company, program tuition does not include any housing or meals. You must meet the following minimum financial requirements:

Single: \$700/month

Married: \$1,400/month

Married with children: \$1,600/month

Beyond tuition, please explain your financial plans for support, insurance, transportation, housing, food, recreation, and other expenses.

Dating

Are you in a dating/courting relationship or engaged? Yes No If yes, answer the following questions.

Is the person you are in relationship with planning to attend an IHOPU program/be living in the Kansas City area during your internship? Yes No If yes, please explain.

Please explain how you plan on adjusting your relationship according to the internship dating policy (see the IHOPU Internship Guidelines in the main application form) if accepted into the internship.

Children

Please list any children ages 1–12 (1-year-olds must be walking) you wish to register for IHOPKC's Children's Equipping Center children's tracks.

Name	Gender	Date of birth
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____

Do any of the children you wish to register require medical care, have special needs or behavioral issues, or need medication? Yes No

If yes, please attach a separate sheet of paper listing any issues, medications, or other concerns.

Please list any children ages 13–17 whom you would like to participate in the internship program with you. Please have each one include a brief written testimony and statement of what they hope to get out of the internship.

Name	Gender	Date of birth
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____
_____	<input type="checkbox"/> M <input type="checkbox"/> F	___/___/_____