



## SUMMER INTERNSHIP APPLICATION

We are an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

### Personal Information

Name

Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Are you a U.S. citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>		Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Do you have reliable transportation? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>		

### Education

School Name	Location	Years Attended	Degree Received	Major (if applicable)

### References

Name	Relationship to Applicant	Phone

### Employment History

Employer (1)	Job Title	Dates Employed
Work Phone	Starting Pay Rate	Ending Pay Rate

Address	City	State	Zip
<b>Employer (2)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (3)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

## Spiritual Life and Ministry

Describe how you came to know the Lord Jesus Christ and your relationship with Him today.

What do you believe is the goal of church ministry?

What are the strengths God has gifted you with for ministry?

What do you believe God still wants you to grow in as a ministry leader?

What is your current involvement in ministry?

Is there a specific ministry you feel God has called you to?

How did you hear about the Harvest St. Louis Summer Internship?

Why do you want to be a part of the Harvest St. Louis Summer Internship?

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## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)	Signature/eSignature
Date	