

Foundations in Counseling Ministry Hurlach, Germany

Guidelines for filling out your FCM application form

Please regard the following points in filling out your application:

1. Main application form:

This form is the main application form to be filled out by the applicant. We recommend using Adobe Reader.

2. Reference forms:

The reference form is to be sent to two different people.

One copy to your recent pastor and another copy to your recent YWAM school / ministry leader. The completed references should be sent to fcm@jmem-hurlach.de. These forms must be sent directly by the person who filled it out, NOT by the applicant.

3. Photo: Send two separate pictures to fcm@jmem-hurlach.de

It needs to be a photo with passport size which should be taken recently at most in the last five months.

4. Registration fee:

(Please transfer the registration fee when sending in the application.)

The FCM Hurlach registration fee is a non-refundable 50€.

This fee can be paid to the following bank account:

JMEM Hurlach, IBAN: DE22520604100005330050, BIC: GENODEF1EK1,

Bank: Ev. Kreditgenossenschaft Kassel.

or to:

paypal@jmem-hurlach.de

Purpose: FCM [first name] [last name]

Course fee:

Lecture Phase

The FCM fee is 2400,-€ for the lecture phase (outreach fee excluded).

This fee covers food, accommodation, school outings, school administration, and fees for guest speakers etc.

Outreach Phase (11 Weeks) 2000-2500 €

This cost will depend on the outreach location, airfare, accommodation, transport and other ministry expenses. Outreach can be in a church, a rehabilitation center, a school, an orphanage, an organization, a counseling related ministry or by conducting seminars and workshops.

STUDENT APPLICATION FORM

Foundations in Counseling Ministry, GERMANY

Counseling Department YWAM
Schlossgasse 1
86857 Hurlach, Germany
Tel.: 08248-12237
E-Mail: fcm@jmem-hurlach.de

I am applying for the FCM in 20__ in Hurlach, Germany.

Are you pursuing a U of N degree? __ Yes __ No __ Uncertain

Personal Information

Family Name: _____

First and Middle Name: _____

Preferred Name: _____

Address: _____

Street: _____ City/State/Postal Code: _____

Country: _____

Phone: _____

E-Mail Address: _____

Date of birth (dd/mm/yyyy) : _____

City and Country of Birth: _____

Male __ Female_____

Nationality: _____

Profession: _____

Marital Status: __ Single __ Engaged __ Married __ Divorced

If married, Name of Spouse: _____

Address and contact details in case of emergency:

1. _____

2. _____

What is your relationship to this person (e.g. parent, pastor, siblings, and relatives)?

Please note the Name, Address and Phone Number of the people who fill in your reference forms:

1. _____

2. _____

Church Information

Church Name and Denomination: _____

Attended since: _____

Name, Address and Phone Number of Pastor/Leader:

Do you regularly attend the service in your church?

If not, why not? _____

In what areas have you carried responsibility in your church?

Does your pastor know that you are applying for this school and does he support you?

Education and Work Experience

Completed schools, including college / university (outside of YWAM):

Name	Location	Years attended	Degree/Major	Remarks

Work experience (outside of YWAM):

Work/Position	Organization /Company	Location	Duration

YWAM programs (schools, outreaches and staff positions):

Program	Location/Base	Years	Leader

Which languages do you speak well?

Which languages do you speak with limited proficiency?

Which special skills do you have (technical, manual, musical etc.)?

Please rate your ability in the following skills:

	Excellent	Above Average	Average	Below Average	Remarks
Building Maintenance					
Vehicle Maintenance					
Gardening Work					
Housekeeping					
Cooking					
Baking					
Childcare					
Musical Worship					

Health Information

How would you describe your present health condition?

Please state the name and contact information of your general practitioner:

Are you at present receiving medical or psychiatric treatment? Yes No

If yes, please specify: _____

Are you or have you been depressive? Yes No.

Are you taking any medication at this time? Yes No.

If yes, please specify: _____

Have you ever struggled with any form of addiction (e.g. alcoholism, nicotine, drugs, pornography)?

Are you currently struggling with an addiction? Yes No.

If yes, what steps are you taking?

Are you allergic to anything? If so, to what extent?

Do you follow any special diet (lactose-free, vegetarian, vegan)? If so, for what reason? Please give us all relevant information, so that our kitchen team can try to work out a suitable alternative.

Do you have any physical impairments, handicaps, or health conditions which require special attention? _____

Will you have medical insurance for the duration of the school? Yes No

Medical insurance is required for all students during the school.
Youth With A Mission does not accept any liability in case of injuries or illnesses.

Financial Information

Do you have your complete school fees? Yes No

If no, please explain from what source they will come.

Do you have any outstanding debts? Yes No.

If yes, please explain:

Passport/Visa Information

Citizens of many western nations do not need a visa for Germany. Please enquire at the German embassy in your country about requirements and procedure. If you need an invitation letter from us, please let us know.

Country of Citizenship: _____

Passport Number: _____

Name as listed on your passport:

Christian Life

Please take a separate piece of paper and describe your conversion experience and your present relationship to Christ. Describe also what you see as your giftings and your ministry; what do you want to do in your life?

Expectations

How did you hear about FCM?

What counseling experience have you had in or out of missions?

What are your reasons to apply for this school?

Do you have an interest in pursuing counseling in the future?

Do you have any counseling needs that you desire help during this school?

In what ways do you plan to use the skills and principles that you will learn on this school in missions or otherwise?

Students taking this course will be expected to complete 3 month field assignment/outreach. Describe any considerations that would effect your ability to fulfill these expectations. Is there any place you would like to do a particular outreach for this school?

I take full responsibility for my actions during my time with Youth With A Mission. If I come without health insurance, I release YWAM from any liability in case of medical expenses. I have answered all questions and affirm that all statements are in accordance with truth.

Date: _____ Signature: _____

I hereby declare that I consent to the usage of photos and footage that depict myself for the presentation and advertisement of the FCM. This includes recorded audio and video material, pictures and photographs on the internet, on local storage devices and/or in printed form. I am aware that I can revoke this consent anytime by written declaration –by letter, note or email.

Date: _____ Signature: _____

Additional questions for those who are in a relationship or married, or have children

If you are in a relationship:

How are you planning to live out your relationship during the FCM?

If you are engaged:

What does your fiancé(-e) think about your plans to attend the FCM?

If you are married:

How would you describe your relationship with your partner? How does the FCM fit into your mutual plans as a couple?

If you have children:

Please give us their names and dates of birth:

1. _____
2. _____
3. _____
4. _____
5. _____

Does your spouse or do your children have a bad health condition?

If so, what (e.g. special diet, physical impairment, psychiatric needs that require special attention)?

At this point we would like to point out some more aspects of student life at the place where we are as YWAM Hurlach, which is a 400 year old castle.

Work Duties

Work duties are part of all YWAM schools.

The standard work duty for FCM students is 10 hours a week.

In addition there are further kitchen duties on some weekends.

It is also necessary to point out the nature of accommodation which we have in the castle. Our students stay in large dorm rooms with a capacity of up to Nine (9) people.

I have read this information attentively and do want to attend the FCM.

Date: _____ Signature: _____

N.B.

We will be able to process your application form only after all the reference forms come in.