



PERSONAL

Surname (Mr, Mrs, Miss, Ms,)

First name Date of birth

Address

Postcode

Telephone number (home) (mobile)

Email address

OCCUPATION

Current occupation

EDUCATION

Please state highest education qualifications you hold

SPIRITUAL

Are you born again?

When did you surrender your life to Jesus as Saviour and Lord?

Have you been baptised in water?

Have you received the Baptism of the Holy Spirit with the evidence of speaking in new tongues?

Please state the Church you attend and your Pastor's name

What spiritual gifting(s) and talent(s) do you feel God has given you?

In which area(s) do you currently serve the Lord in your Church, or are willing to begin to serve?

LEADERSHIP SCHOOL SPECIFICS

What are you looking to benefit from participating in the Word & Spirit School of Leadership?

Are you willing to make time to attend Leadership training sessions once a month for the one-year programme? YES / NO

Leadership development takes humility and sacrifice. Are you willing to submit to loving correction and make sacrifices while on the programme where necessary? YES / NO

After the Word & Spirit School of Leadership is over, what do you hope to do? _____

DATA PROTECTION CONSENT

Word & Spirit School of Leadership collects the information requested in this application to provide the best experience for you and treats this information with great care. We do not use your information for any other purpose, and we do not sell or give your information to any third party without your consent.

You may ask us to remove or correct your information at any time, other than information we need to keep for legal obligations or vital interest.

To do this send an email to info@wordoflife-lcc.org.

To check all your individual data protection rights, and how we safeguards these, please read our Privacy Policy at <http://wordoflife-lcc.org/site/index.php/privacy-policy>.

Please tick the consent box below to give your consent for Word & Spirit School of Leadership to store all the personal information you give us for the purpose of this application.

Yes, I consent to the above.

Applicant's signature _____

Date _____

Pastor's signature _____

Date _____