



ENCOUNTERING THE WORLD OF ISLAM

COURSE APPLICATION

12 WEEK COURSE (Saturdays 11am - 2pm)

Course Fee: \$250. Apply before July 10th for a \$25 discount

All forms should be sent together in one packet. Packet should include:

1. Application form, completed and signed
2. Deposit of \$100 by check, cash or online at www.ihopeg.org (**deposits are non refundable**)

3. Mail packet to:

IHOP-EG EWI Course
950 Raritan Road
Cranford, NJ 07016
or E-mail: EWI@ihopeg.org
for instructions on dropping
off application.

4. Applications must be received no later than July 18th, 2017. You will receive a confirmation via e-mail of your registration.

This course will run from August 19th - November 11th

PERSONAL INFORMATION:

Last Name: _____

First Name: _____

Address: _____

Home Phone: (____) _____

Cell Phone: (____) _____

Email: _____

Date of Birth: ____/____/____

FAMILY INFORMATION:

1. Emergency Contact: _____

Relation to Applicant: _____

Home Phone: (____) _____

Cell Phone: (____) _____

2. Marital Status; circle all that apply. Single Engaged Married Widowed Separated * Divorced *

* Please include an explanation:

EDUCATION, EMPLOYMENT, and MINISTRY BACKGROUND:

1. List senior high and institutions of higher education you have attended, with the most recent first. Add additional pages if necessary.

School Name	City, State	Dates attended	Diploma/degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. List current employment details, if you are currently employed.

Employer _____ City, State _____ Date _____

Phone _____ Supervisors _____

Responsibilities _____

3. List current church involvement.

Church name, city, and state	Dates	Senior Pastor	Attended (please circle) Regularly / Occasionally
_____	_____	_____	

3a. If you are not involved in a church, please explain:

4. Briefly list past and current areas of ministry or service (especially cross-cultural).

5. Do you speak English fluently? _____

6. Please list any languages that you speak fluently other than English: _____

7. Why do you desire to take this course?

8. How do you see yourself taking advantage of the course? Do you have any thoughts about what the future might hold?

9. Have you asked your home church about a scholarship for this class? If so, what was their response?

PERSONAL EVALUATION

Please be honest in answering the questions below. The internship is a season of consecration not only for you, but also for all interns. In the level of community that this season requires, it is better for IHOP-EG leadership to have this information on the front-end. It will not be disseminated outside of IHOP-EG leadership.

1. Please describe any substance abuse or addictions you may have or are currently dealing with.

2. Please describe any strong mental, emotional, physical or relational issues that you have had or are currently dealing with.

Here are some examples that serve as a reference for answering #1 and #2 above.

- | | |
|---|--|
| <input type="checkbox"/> ADD or ADHD | <input type="checkbox"/> Alcohol abuse |
| <input type="checkbox"/> Mild depression | <input type="checkbox"/> Drug abuse, including cigarettes and prescription drugs |
| <input type="checkbox"/> Chronic depression | <input type="checkbox"/> Long-term medication |
| <input type="checkbox"/> Chronic fatigue syndrome | <input type="checkbox"/> Eating disorders: bulimia, anorexia, diet obsessive, etc. |
| <input type="checkbox"/> Chronic pain | <input type="checkbox"/> Allergies _____ |
| <input type="checkbox"/> Insomnia or other sleeping disorders | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> HIV or AIDS |
| <input type="checkbox"/> Seizures | <input type="checkbox"/> Communicable diseases _____ |

REFERENCE CONTACTS

Please list the contact information of three people including your pastor for a reference check. Please let them know that they may or may not be contacted for a phone interview. The referees must be unrelated to the applicant and must have known the applicant for at least two years. The pastoral referee must be unrelated to the applicant and must have known the applicant for at least one year.

Personal Contact #1

Name: _____

E-mail: _____

Phone: _____

Personal Contact #2

Name: _____

E-mail: _____

Phone: _____

Pastoral Contact

Name: _____

E-mail: _____

Phone: _____

ABOUT THE COURSE:

Encountering the World of Islam (EWI) is a 12-lesson course that moves participants from an awareness of Muslims to sharing in God's compassion for them. Combining typical learning assignments with experiential and online activities, EWI mobilizes and educates believers through readings, a variety of Muslim and Christian instructors from around the Muslim world, personal meetings with Muslims, a visit to a local mosque, and thoughtful discussion with fellow classmates. This rich combination makes EWI engaging and life-changing, empowering participants not just to understand but to reach Muslim peoples with the gospel of Christ.

COURSE COST: Includes book, online resources, non-refundable registration fee. Course cost is \$250 this includes all material needed for 12 weeks including the book and workbook (Encountering the World of Islam).

IHOP-EG MISSIONS BASE FOUNDATIONAL COMMITMENTS

We recognize that external rules of behavior are not the highest ideal for any Christian community and desire that our motivation for holiness would be love for Jesus and His people, not rules. In this spirit we affirm the following:

The IHOP-EG community expects all its staff members (all staff, students, and interns), to make a personal commitment to live counter to the prevailing moral laxity of our society by not participating in, advocating, supporting, or condoning sexual activity (heterosexual or homosexual) outside of marriage between a man and a woman as set forth in the Scripture. Further, we will demonstrate our commitment to Christ and to each other by refraining from the use of tobacco, and the public or social use of alcoholic beverages. We ask that every intern have a teachable spirit, a willingness to learn, and that they are sincere in their pursuit of holiness.

IHOP-EG VISION STATEMENT

We desire:

1. To call forth, train, and mobilize intercessors to live a life of prayer as they preach the gospel, heal the sick, help the needy, make disciples, and seek to bring transformation to society; to make it our aim to personally live as fully de- voted disciples of Jesus who operate in the forerunner spirit.
2. To establish a perpetual solemn assembly in the NY/NJ metro region by gathering corporately to fast and pray, because we recognize this as essential to establishing justice in society.
3. To train others to plant houses of prayer, churches, and/or marketplace ministries as the Spirit leads.

ACKNOWLEDGMENT OF AGREEMENT

Please initial below:

- I have read, agree with, and will abide by the IHOP-EG guidelines.
- I have read, agree with, and will abide by the IHOP-EG Missions base foundational commitments.
- I have read and agree with the IHOP-EG vision statement.
- I understand that my program at IHOP-EG will include physical ministry training and service to others.
- I understand that I must be true and responsible to my attendance commitment.
- I declare that the information I have provided in my application is true, accurate, and complete to the best of my knowledge.

Signature: _____

Date: ___/___/___