



# Fellowship Bible Church

## Internship Application

Everyone, Everywhere Experiencing Jesus!



480 West Crossville Road, Roswell, Georgia 30075



[www.fellowshipproswell.org](http://www.fellowshipproswell.org)



1 770.992.4956

# Internship Application

## APPLICANT INFORMATION

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Name:	_____	Date of Birth:	_____
Address:	_____	City, State & Zip:	_____
Phone:	_____	Email:	_____

## EDUCATION

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School Name: \_\_\_\_\_

Current Grade/Year: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

## INTERNSHIP INTEREST

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Why are you interested in a summer internship at Fellowship Bible Church?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Which ministry area(s) are you most interested in? (Check all that apply)

Student Ministry

Children's Ministry

Early Childhood (Nursery/Preschool)

Elementary

Special Needs

Children's Ministry 101 (Components of all the above)

Worship Ministry/Production/Media

Missions/Outreach

Facilities/Operations

Administration

Other: \_\_\_\_\_

## AVAILABILITY & COMMITMENT

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Which term(s) are you available for this internship?

Summer

School Year

Both

Available Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

What specific days/times are you available? \_\_\_\_\_

How many hours per week are you available? \_\_\_\_\_

Is this internship part of a school program? Yes No

If yes, what are the requirements of your program?

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### PERSONAL & SPIRITUAL GROWTH

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Do you have any previous ministry experience? If so, please describe.

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Do you feel called to full-time ministry? Why or why not?

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What are your greatest strengths?

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What are some areas of weakness or areas of growth for you?

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Why would you like to serve as an intern in this specific ministry department?

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What are your personal goals while serving as an intern?

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## TESTIMONY

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How is your faith impacting your daily life?

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Please share your testimony on how you come to faith in Christ.

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How has the Lord been working in your life?

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## REFERENCES

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Please provide three references (non-family) who can speak to your character, leadership, and work ethic

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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## EMERGENCY CONTACT

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In case of an accident or illness, please contact.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

Allergies: \_\_\_\_\_

#### WAIVER AND CONSENT FOR INTERN VOLUNTEER

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I \_\_\_\_\_, hereby certify that the information I have provided on this intern volunteer application is true and correct. I understand that submission of an application does not guarantee an internship. I authorize this church to verify the information I have provided by contacting the references I have listed, including contacting others whom I have not listed.

In the event that my application is accepted and I become an intern volunteer of Fellowship Bible Church of Roswell, Inc. (herein referred to as FBC), I agree to abide by and be bound by the policies of FBC.

I understand that no representative of FBC has the authority to enter into any agreement guaranteeing any conditions of internship or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the Human Resources Director of FBC.

I have read this waiver and the entire application, and I am fully aware of its contents.

#### PARENT/GUARDIAN CONSENT (if applicant is under 18)

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I, \_\_\_\_\_ give permission for my child, \_\_\_\_\_ to participate in the Summer Internship Program at Fellowship Bible Church. I understand that my child may be involved in ministry-related activities both on and off church premises.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_