



Heal Ministries Internship Application

Please complete this application and attach via email to molli@heal-ministries.org

Name:		
Desired date to intern:		
Address:		
School attending & year in school:		
Major:		
Email:		
Phone Number:		
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female

Will you be receiving school credit? If yes, how many hours are needed for credit?

After prayerful consideration, please answer the following questions:

What do you hope to receive from this experience?

What are your gifts, strengths, and weaknesses?

Describe a situation when you served as a team member.

Please list any volunteer community involvement that you have participated in and the dates.

Please list any mission trips that you have been on or trips out of your home country.

Are you a Christian? If yes, please write a short paragraph describing your experience receiving Christ. If no, please write a short paragraph about your beliefs.

Personal References- please do not list relatives

Name:	Phone Number:
Name:	Phone Number:
Name:	Phone Number:

Job References

Place of Employment:	Name:	Phone Number:
Place of Employment:	Name:	Phone Number:

