



Campus Crusade for Christ
STAFF APPLICATION (Form AF2.1)

PLEASE ANSWER ALL QUESTIONS

Date ___/___/___ Have you previously applied to join or been employed by Campus Crusade for Christ?
[] No [] Yes If Yes, in which country(ies)? _____

Mr/Mrs/Miss/Dr. _____
Last Name First Name Middle Name

Home Address _____

Phone Contact (cell) _____ (home) _____ E-mail: _____

Date of Birth ___/___/___ [] Male [] Female Citizenship(s) _____

MINISTRY INTERESTS

A. I am applying to join as: ___ FULL-TIME STAFF ___ INTERN (short-term, in-country : ___ 1yr ___ 2yrs)
___ STINTER (short-term, international) ___ OFFICE EMPLOYEE ___ ASSOCIATE STAFF

B. Please indicate the particular national ministry of Campus Crusade for Christ within Latin America & the
Caribbean to which you are applying : _____

C. Please check the Mission Critical Component (MCC) in which you would like to serve. You may choose two in
order of preference (put #1 for your first choice, #2 for your second choice)
___ SLM (Student-Led Movements) ___ LLM (Leader-Led Movements)
___ GCM (Global Church Movements) ___ DS (Digital Strategies)
___ Ops (Operations) ___ LDHR (Leadership Development & Human Resources)
___ Fund Development

D. Languages you speak fluently: ___ English ___ Spanish ___ Portuguese ___ French ___ Dutch ___ Other: _____

EDUCATION Please list your highest educational attainment to date:
College/Univ. City/Country Year Graduated Major Degree Diploma

Please prepare copies of certificates to submit when you are contacted for the interview.

SPIRITUAL BACKGROUND

A. When did you become a Christian? month: _____ year: _____

B. Name and denomination of church you are now attending _____
How long have you attended this particular church? _____

C. On a separate page, tell us how and when you became a Christian and talk about your personal growth in Christ
since then.

D. Explain how and why you believe God is leading you to the ministry of Campus Crusade for Christ.

MARITAL STATUS AND FAMILY

A. ___ Single
___ Engaged Is fiancé(e) employed with Campus Crusade for Christ? If not, is he/she applying to join? _Y_N
___ Married Marriage date: _____ Spouse's name (include maiden) _____

B. Have you ever been divorced, separated or had an annulment of marriage? _____
If so, please give the date of the final decree and the grounds upon which it was granted. _____

C. Please list your children and/or dependents, if any.

Name	Relationship	Birth Date	Dependent? (yes/no)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

HEALTH

The national ministry may ask you to fill out a health/medical questionnaire as part of their application process.

FINANCIAL & OTHER ADDITIONAL INFORMATION

The national ministry may ask you to fill out additional form(s) as part of their application process.

EMPLOYMENT HISTORY Please list your current or most recent employer:

Employer _____ Dates employed ___/___/___ to ___/___/___
Address _____ Phone # _____
Job Title _____ Type of Work _____
Reason for Leaving _____
To whom should the reference be addressed? _____

I declare by my signature below that:

1. I pledge myself to help fulfill the Great Commission in our generation, depending upon the Holy Spirit to guide and empower me.
2. I have read, understood and agree with the Statement of Faith of Campus Crusade for Christ.
3. I am aware that I am responsible to raise whatever financial support is necessary to fund my involvement with Campus Crusade for Christ if my application is accepted.
4. To the best of my knowledge, all of the information in this application is true and complete. I also authorize you to make such inquiries into my personal employment, finances, medical history or other related matters as may be necessary in arriving at an acceptable decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

Signature of Applicant _____ Date _____

REFERENCES

Please give names, addresses and phone numbers of three references who have known you for a *minimum* of one year, who may be contacted by our office. If any of the categories do not apply, please substitute an additional name. Please do not include relatives or fiancé(e). *You may be asked by the national ministry for further references.*

1. **Pastor**
Name _____ Length of Acquaintance _____
Address _____ Phone # _____
E-mail _____
2. **Campus Crusade for Christ staff member** (even if known for less than one year)
Name _____ Length of Acquaintance _____
Address _____ Phone # _____
E-mail _____
3. **Business/Academic Associate or Peer/Friend**
Name _____ Length of Acquaintance _____
Address _____ Phone # _____
E-mail _____

*You may be asked by the national ministry for additional biographical information.
If you do not have your past employers' or references' contact information with you,
DO NOT LET THIS PREVENT YOU FROM APPLYING.*

Leave the contact information blank and you can supply this information when the national ministry contacts you.

THANK YOU FOR APPLYING!

A REPRESENTATIVE OF LEADERSHIP DEVELOPMENT & HUMAN RESOURCES (LDHR) FROM THE NATIONAL MINISTRY TO WHICH YOU APPLIED WILL CONTACT YOU WITHIN THE NEXT TWO WEEKS REGARDING NEXT STEPS, AND ADDITIONAL INFORMATION REQUIRED TO PROCESS YOUR FULL APPLICATION.