



Please mail or email your completed application to Blackhawk Church 9620 Brader Way Madison, WI 53593 or internship@blackhawkchurch.org

Internship Application

All information gathered through the screening process will be treated as confidential.

General Information

Name \_\_\_\_\_ Date \_\_\_\_\_
Preferred Address \_\_\_\_\_
Preferred Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_
Email address \_\_\_\_\_
Gender: Male Female
Marital Status: Single Married Name of spouse \_\_\_\_\_
How did you hear about the program? \_\_\_\_\_

Intern Program Specifics

1. I am applying for the following track (circle one or more)
summer program (May-Aug.)
summer & year-long program (May-May)
year-long program (Aug.-May)
mid-year program (Jan.-May)
2. I am applying for the following hours per week: 20, 30, 40
3. Interns work closely with a specific staff member and thus will have a specific ministry focus along with general responsibilities. Please number the following ministry areas (0-5) according to your level of interest, with 5 being the highest. Then, in a few sentences, state why you are passionate your top choice(s).
Children's Ministry Adults Ministry
Middle School Ministry Impact/Missions Ministry
High School Ministry Worship Arts Ministry
College Ministry Finance/Administration
Care Ministry Communication/Graphic Design

Four horizontal lines for providing answers to question 3.

**Education Background**

Please list all schools attended after grammar school, such as high school, technical college, university, graduate school, Bible institute or seminary.

| School | State | Years Completed | Degree | GPA   |
|--------|-------|-----------------|--------|-------|
| _____  | _____ | _____           | _____  | _____ |
| _____  | _____ | _____           | _____  | _____ |
| _____  | _____ | _____           | _____  | _____ |
| _____  | _____ | _____           | _____  | _____ |

Are there any training courses or seminars you have completed which you feel have helped prepare you for the ministry experience you are applying for? If so, please list the course title, date completed and the major benefit to you.

\_\_\_\_\_

\_\_\_\_\_

**Employment History**

1. Most Recent Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
*Street city state zip*  
Dates Employed \_\_\_\_\_ Position \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name & title of Supervisor \_\_\_\_\_ May we contact this employer? Yes No
2. Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
*Street city state zip*  
Dates Employed \_\_\_\_\_ Position \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name & title of Supervisor \_\_\_\_\_ May we contact this employer? Yes No
3. Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
*Street city state zip*  
Dates Employed \_\_\_\_\_ Position \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
Name & title of Supervisor \_\_\_\_\_ May we contact this employer? Yes No

**Strengths/Skills Profile**

1. Strengths and Weaknesses: List your top three strengths and top three weaknesses

*Strengths*

*Weaknesses*

1. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

3. \_\_\_\_\_

2. Please number the following skill areas (0-5) according to your level of experience, with 5 being the highest.

\_\_\_\_\_ Accounting/Finance

\_\_\_\_\_ Music (please specify) \_\_\_\_\_

\_\_\_\_\_ Audio Production

\_\_\_\_\_ Graphic Arts

\_\_\_\_\_ Photography

\_\_\_\_\_ Languages (please specify) \_\_\_\_\_

\_\_\_\_\_ Journalism

\_\_\_\_\_ Office Skills

\_\_\_\_\_ Computer Skills

\_\_\_\_\_ Team Leadership (please specify) \_\_\_\_\_

\_\_\_\_\_ Video Production

3. Please note any additional skills or interests.

---

---

**Ministry Profile**

1. Please number the following ministry areas (0-5) according to your level of experience, with 5 being the highest.

\_\_\_\_\_ Children's Ministry

\_\_\_\_\_ Adults Ministry

\_\_\_\_\_ Care Ministry

\_\_\_\_\_ Middle School Ministry

\_\_\_\_\_ College Ministry

\_\_\_\_\_ Finance/Administration

\_\_\_\_\_ High School Ministry

\_\_\_\_\_ Worship Arts Ministry

\_\_\_\_\_ Impact/Missions Ministry

\_\_\_\_\_ Communication

2. Passion: What aspects of ministry excite you? What aspects don't?

---

---

---

---

---

3. **Spiritual Gifts:** If you have taken a spiritual gifts assessment, list your top three spiritual gifts and how have you seen them fit with your ministry experience? If you do not know your spiritual gifts we can provide a spiritual gifts evaluation (email [internship@blackhawkchurch.org](mailto:internship@blackhawkchurch.org)).

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

---

---

---

---

**Personal Story:** Please include brief responses to the following questions with the application

1. Please describe your faith journey. Include how God got your attention and some significant experiences and people that He used. How has this journey prepared you for this position?

2. How does this position fit into your short and long-term goals? What do you hope to gain from this experience?

**References** List the contact information of the individuals (excluding family members) whom you are giving the reference forms. You will need to send reference forms to the individuals listed below. The form can be obtained on Blackhawk's website, [www.blackhawkchurch.org/about\\_blackhawk/internship\\_program](http://www.blackhawkchurch.org/about_blackhawk/internship_program)

List two contacts you've served under in ministry:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Email Address \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Email Address \_\_\_\_\_

List two contacts you've served with in ministry:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to applicant \_\_\_\_\_

Email Address \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship to applicant \_\_\_\_\_  
Email Address \_\_\_\_\_

List two people you have influenced through your leadership:

1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship to applicant \_\_\_\_\_  
Address \_\_\_\_\_ City, State Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship to applicant \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

**Church or Parachurch Background**

Please list all churches you have regularly attended in the past 10 years and any previous ministry experience or volunteer involvement.

1. Current Church Name \_\_\_\_\_ Dates attended \_\_\_\_\_  
Church Address \_\_\_\_\_  
Church Phone \_\_\_\_\_ Email \_\_\_\_\_  
Staff contact (name & position) \_\_\_\_\_  
Ministry Experience \_\_\_\_\_

2. Church/Parachurch Name \_\_\_\_\_ Dates attended \_\_\_\_\_  
Church Address \_\_\_\_\_  
Church Phone \_\_\_\_\_ Email \_\_\_\_\_  
Staff contact (name & position) \_\_\_\_\_  
Ministry Experience \_\_\_\_\_

3. Church/Parachurch Name \_\_\_\_\_ Dates attended \_\_\_\_\_  
Church Address \_\_\_\_\_  
Church Phone \_\_\_\_\_ Email \_\_\_\_\_  
Staff contact (name & position) \_\_\_\_\_  
Ministry Experience \_\_\_\_\_

**Background Info**

- 1. Are you legally authorized or permitted to work in the United States? Yes No
- 2. Are there any past or present issues (spiritual, physical, emotional/mental, social), which would hinder your ability to work appropriately with children or students? Yes No
- 3. Have you ever been accused, charged or convicted of a criminal offense (felony or misdemeanor other than a parking violation)? Yes No
- 4. Have you struggled in the past or are you currently struggling with any addictions (alcohol, drug, pornography, etc.)? Yes No
- 5. Is there anything from your past that may come up in the future about you that could hurt the ministry of Blackhawk Church? Yes No

If you answered no to question 1 or yes to questions 2-5, please explain (attach additional page if needed).

---

---

**Background Check**

*This form authorizes the church to obtain background information and must be completed by the applicant.*

Name \_\_\_\_\_  
Last First Middle

Other names used (maiden, nickname, alias) \_\_\_\_\_

Driver's License Number (and state) \_\_\_\_\_ Gender \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Current address \_\_\_\_\_  
street city state zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

*If you have lived at your current address less than three years, please provide your former address.  
If you are a college student, please provide your permanent address.*

Former Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

In the interest of safety and security I, the undersigned applicant, authorize Blackhawk Evangelical Free Church to procure background information about me, prior to, and at any time during, my service to the organization. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request. For a copy of this report, please contact Vista International Research, LLC at 1400 Buford Hwy, Suite J-1, Sugar Hill, GA 30518 or call (678) 730-7300. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature \_\_\_\_\_ Date \_\_\_\_\_