

IBC, Madrid Apprenticeship Program Application Form

Please complete all sections of this form. Incomplete applications may not be considered.

Part 1: Personal Information

Full Name: _____

Preferred Name (if different): _____

Date of Birth (DD/MM/YYYY): _____

Current Address: _____

Phone Number: _____

Email Address: _____

- Are you a member of [Church Name]? ☐ Yes ☐ No
 - If Yes, for how long? _____
- If No, are you willing to join? ☐ Yes ☐ No

Part 2: Apprenticeship Interest

- Which Apprenticeship Track(s) are you most interested in? (Please select all that apply)
 - ☐ Youth Ministry
 - ☐ Worship Ministry
 - ☐ Administration
 - ☐ Children's Ministry
 - ☐ Outreach Ministry
 - ☐ Other (Please specify): _____
- Why are you interested in participating in the IBC, Madrid Apprenticeship Program? (Please be specific about your goals and what you hope to gain.)

- **What do you believe you would bring to this apprenticeship?**
- **Are you willing to commit to the duration of the apprenticeship ?**
☐ Yes ☐ N

Part 3: Relevant Experience

- **Please describe any previous ministry experience (volunteer or paid):**
 - Role/Organization: _____
 - Dates (From - To): _____
 - Key Responsibilities and Accomplishments: _____
- **Please describe any other work or volunteer experience that you believe is relevant to this apprenticeship:**
 - Role/Organization: _____
 - Dates (From - To): _____
 - Key Responsibilities and Accomplishments: _____
- **Do you have any specific skills that might be valuable in this apprenticeship?** (e.g., music, technology, communication, administration)

Part 4: Spiritual Background

- **Please briefly share your personal testimony of faith in Jesus Christ.**
- **Describe your current involvement in IBC, Madrid or another church community.**

- **Have you been a part of the SHAPE training?** ☐ Yes ☐ No

What are your spiritual gifts?

- **What do you feel the Lord is calling you to do?**

- **Describe your calling?**

- **What areas of your life are currently seeking spiritual growth?**

Part 5: References

Please provide the names and contact information of three individuals who can speak to your character, spiritual maturity, and suitability for this apprenticeship. At least one reference should be a leader or member of your current church.

Reference 1 (Church Leader/Member):

- **Full Name:**

- **Relationship to You:**

- **Phone Number:**

- **Email Address:**

Reference 2 (Other - e.g., Employer, Mentor, Friend):

- **Full Name:**

- **Relationship to You:**

- **Phone Number:**

- **Email Address:**

Reference 3 (Other - e.g., Employer, Mentor, Friend):

- **Full Name:**

- **Relationship to You:**

- **Phone Number:**

- **Email Address:**

Part 6: Agreement and Submission

- **I understand that this is an application for an apprenticeship program at IBC, Madrid and that completing this form does not guarantee acceptance into the program. ☐ Yes**
- **I affirm that the information provided in this application is accurate and complete to the best of my knowledge. ☐ Yes**

Signature: _____

Date: _____

Please submit this completed form and any required supporting documents to info@ibcmadrid.com.

Thank you for your interest in the IBC, Madrid Apprenticeship Program!