INTERNATIONAL HOUSE OF PRAYER UNIVERSITY

APPLICATION

Instructions:

1. Please indicate below which school or internship you are applying for, and the month and year you are applying for.
2. Visit IHOP.org/ihopu. View the Academic Calendar to find the exact start date, and the Tuition page for tuition amount, as these are subject to change.
3. Insert the specific start date and tuition amount for your program on page 1 of the application.
4. All applicants for IHOPU schools and internships should complete the IHOPU application, pages 1–7.
5. If you are applying for an internship, please also complete the addendum and background check authorization form at the back of the application.

Forerunner School of Ministry: ☐ August/year _____ ☐ January/year _____

TheCall Institute: ☐ August/year _____ ☐ January/year _____

Forerunner Music Academy: ☐ August/year _____ ☐ January/year _____

Forerunner Media Institute: ☐ August/year _____

Intro to IHOP–KC: ☐ January/year _____ ☐ April/year _____ ☐ July/year _____ ☐ September/year _____

One Thing Internship: ☐ January/year _____ ☐ July/year _____

Fire in the Night: ☐ January/year _____ ☐ April/year _____ ☐ July/year _____ ☐ September/year _____

Simeon Company: ☐ January/year _____ ☐ April/year _____ ☐ July/year _____ ☐ September/year _____

IHOPU APPLICATION FORM INCLUDES

1. IHOPU application form
2. IHOPU internship guidelines
3. IHOP–KC foundational commitments
4. IHOP–KC vision statement
5. IHOP–KC statement of faith
6. Pastoral recommendation form (completed by someone who is unrelated to the applicant and has known the applicant for at least one year)

International House of Prayer University, Admissions Office
12901 S. US Highway 71, Grandview, MO 64030 | Phone: 816.763.0243 | Fax: 816.763.0439 | IHOP.org/ihopu | admissions@ihopu.org

7. Personal recommendation form (completed by someone who is unrelated to the applicant and has known the applicant for at least two years)
8. Internship application addendum and background check authorization form (internship applicants only)

APPLICATION PROCESS

The application has seven components, which must all be sent together in one packet. Admissions decisions will not be made until we receive your ***complete*** application.

1. Application form, completed and signed, with addendum, if applying for an internship
2. Current, personal photograph attached to the application
3. Personal testimony typed on a separate sheet; no more than two pages
4. Completed, pastoral recommendation in a sealed and signed envelope
5. Completed, personal recommendation in a sealed and signed envelope
6. Non-refundable $50 application fee per applicant; $125 for international applicants; make checks payable to IHOPU with the applicant's name in the memo

7a. FSM, FMA, FMI, and TCI applicants must submit high school/secondary school transcripts (or official GED copies)
7b. Internship applicants must complete the internship addendum and background check authorization form

Applications for internships must be received no later than two weeks prior to the internship start date. Applications for IHOPU's 2012 spring semester must be received no later than December 31, 2011.

INTERNATIONAL APPLICANTS

If you are an international applicant (any applicant who is not a U.S. citizen, a U.S. national, or a U.S. legal permanent resident), please visit IHOP.org/admissions/international-admissions.

MAILING ADDRESS

International House of Prayer University, Admissions, 12901 S. US Highway 71, Grandview, MO 64030

ACCEPTANCE

1. We will contact you to let you know we have received your application, and to arrange a phone interview.
2. We will generally notify you of your acceptance or denial within thirty days of your phone interview.
3. Applicants are not accepted to any IHOPU program until they have received an official notification of acceptance from the IHOPU Admissions office.
4. Accepted students and interns will receive further instructions by email from IHOPU.
5. Please email admissions@ihopu.org or call 816.763.0243 x.7150 if you have any questions during the application process.

PAYMENT

Students accepted for spring 2012 must pay tuition by January 23, 2012. Interns may view their program-specific payment deadlines at IHOP.org/ihopu/internships under the Program Info section of their internship web page.

Payment may be made by credit or debit card through the IHOP–KC business office at 816.763.0200 x.2201, Monday–Friday, 9:00am–5:00pm CST. It may be made by check or money order by mailing to the address above. Make checks payable to International House of Prayer University and include the name of the school or internship, and the applicant's name in the memo.

PERSONAL INFORMATION

Attach a current photo here

Date of application _____
School/internship applying for _____
School/internship start date _____ Tuition amount $_____

Last/family name _____
First/given name _____ Middle name _____
Address _____
City _____ State _____
Zip/post code _____ Country _____
Home phone _____ Mobile phone _____
Email _____ Social Security # _____
Date of birth (MM/DD/YY) _____ Age _____

LEGAL STATUS

Please check the box that applies to you.
☐ U.S. citizen ☐ U.S. national ☐ U.S. legal permanent resident
☐ International applicant (any applicant who is not a U.S. citizen, a U.S. national, or a U.S. legal permanent resident)
If you are currently in the U.S., what type of visa do you have? _____
Country of citizenship _____ Country of birth _____

FAMILY INFORMATION

1. Father/guardian _____ ☐ Deceased ☐ Living Phone _____
   Address _____ City _____
   State _____ Zip/post code _____ Country _____

2. Mother/guardian _____ ☐ Deceased ☐ Living Phone _____
   Address _____ City _____
   State _____ Zip/post code _____ Country _____

3. Marital status; check all that apply. ☐ Single ☐ Engaged ☐ Married ☐ Widowed ☐ Separated* ☐ Divorced*
*Please include an explanation on a separate sheet of paper.

4. If you are married, please answer the following question. If not, skip to question 5.

Spouse's name _____ Date of birth _____ Age _____ How long married?_____

Is your spouse attending IHOPU? ☐ Yes ☐ No <u>If yes</u>, your spouse must complete a separate application and submit it with yours. <u>If no</u>, please include a letter from your spouse that describes their Christian experience, their feelings about your time at IHOPU, and their feelings about your potential position on staff.

5. Do you have children? ☐ Yes ☐ No If yes, please list each child coming to Kansas City with you.

Name	Gender	Date of birth	Coming to KC?
_____	☐ M ☐ F	_____	☐ Yes ☐ No
_____	☐ M ☐ F	_____	☐ Yes ☐ No
_____	☐ M ☐ F	_____	☐ Yes ☐ No

EDUCATION, EMPLOYMENT, AND MINISTRY BACKGROUND

1. List senior high/secondary school and institutions of higher education you have attended, with the most recent first.

School name	City, state	Dates attended	Diploma, degree

2. List previous places of employment, with the most recent first.

Employer _____ City, state _____ Dates _____
Phone _____ Supervisor _____
Responsibilities _____ Reason for leaving _____

Employer _____ City, state _____ Dates _____
Phone _____ Supervisor _____
Responsibilities _____ Reason for leaving _____

Employer _____ City, state _____ Dates _____
Phone _____ Supervisor _____
Responsibilities _____ Reason for leaving _____

3. Are you currently involved in a local church? ☐ Yes ☐ No If not, please explain on a separate sheet of paper.

4. List previous church involvement, with the most recent first.

Church name, city, and state	Dates	Senior pastor	Attended
			☐ Regularly ☐ Occasionally
			☐ Regularly ☐ Occasionally
			☐ Regularly ☐ Occasionally
			☐ Regularly ☐ Occasionally

5. Describe your previous ministry training and involvement. Use an extra sheet of paper if more space is needed.

_____
_____
_____
_____

6. Describe how your church or spiritual family feels about your time as an IHOPU student or intern.

_____
_____
_____
_____

7. Do you speak any languages besides English? ☐ Yes ☐ No If yes, which language(s): _____

8. (FMA applicants only): What is your primary instrument? Select only one of the following:
☐ Piano/keys ☐ Acoustic guitar ☐ Electric guitar ☐ Bass guitar ☐ Drums ☐ Voice
☐ Other, please specify _____

9. (FMI applicants only): Please list any media experience you have, including skills learned and equipment used. Note: lack of media experience will not necessarily disqualify you from attending FMI.

PERSONAL EVALUATION

1. Please assess yourself in the following areas.

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual maturity	☐	☐	☐	☐	☐
Devotion to Jesus Christ	☐	☐	☐	☐	☐
Integrity and honesty	☐	☐	☐	☐	☐
Openness to correction	☐	☐	☐	☐	☐
Self-discipline	☐	☐	☐	☐	☐
Working without supervision	☐	☐	☐	☐	☐
Willingness to serve	☐	☐	☐	☐	☐
Ability to work with others	☐	☐	☐	☐	☐
Communication skills	☐	☐	☐	☐	☐
Leadership skills	☐	☐	☐	☐	☐
Reliability	☐	☐	☐	☐	☐
Teachability	☐	☐	☐	☐	☐
Emotional stability	☐	☐	☐	☐	☐
Physical health	☐	☐	☐	☐	☐
Family life	☐	☐	☐	☐	☐

Additional comments or explanations:

2. What do you consider to be your talents, gifts, and strengths?

3. What do you consider to be your weaknesses or struggles?

4. What are some of your hobbies and interests?

5. Describe what aspect of IHOP–KC interests you the most.

6. How did you hear about IHOP–KC/IHOPU?

_____

_____

7. What led you to apply to IHOPU?

_____

_____

8. Have you applied for or attended any training program at IHOPU in the past? ☐ Yes ☐ No
If yes, list which programs, the dates you applied or attended, and why you are applying or attending again.

_____

_____

9. What is your plan for paying tuition?

_____

_____

10. Do you plan on bringing a vehicle? ☐ Yes ☐ No

11. Do you currently have any financial debt? ☐ Yes ☐ No If yes, please explain and include your plans for managing it if accepted into IHOPU.

_____

_____

PERSONAL TESTIMONY

Please write your personal testimony in a separate typed document. Include the following points:

1. A summary of your personal journey in Christ
2. Any past or present life-controlling issues, whether mental, emotional, or relational
3. Your goals for the future, including your life vision and ministry plans
4. Expectations for your time at IHOPU and a summary of what you hope to learn at IHOPU

HEALTH INFORMATION

1. Please mark if you have had any occurrences of the following, whether mild or severe:

☐ ADD or ADHD
☐ Mild depression
☐ Chronic depression
☐ Chronic fatigue syndrome
☐ Chronic pain
☐ Insomnia or other sleeping disorders
☐ Diabetes
☐ Seizures
☐ Alcohol abuse
☐ Drug abuse, including cigarettes or prescription drugs
☐ Long-term medication
☐ Eating disorders: bulimia, anorexia, diet obsessive, etc.
☐ Allergies _____
☐ Asthma
☐ HIV or AIDS
☐ Communicable diseases _____
☐ Other _____

If you checked any of the above, please explain. Use a separate sheet of paper if necessary.

_____

_____

_____

2. Do you have any physical disabilities or conditions that require special care? ☐ Yes ☐ No If yes, please explain.

3. Do you have any substance abuse problems or addictions? ☐ Yes ☐ No If yes, please explain.

4. Do you currently have, or have you ever had, any life-controlling mental, emotional, or relational issues?
☐ Yes ☐ No If yes, please explain.

5. Have you ever voluntarily or involuntarily received help for psychological, sexual, emotional, or relational problems?
☐ Yes ☐ No If yes, please provide details below.

Year	Caregiver(s)/program(s)	Identified problem(s)

6. Have you ever been accused of and/or reported for physically or sexually abusing someone?
☐ Yes ☐ No If yes, please explain on a separate sheet.

7. Do you have a police record? ☐ Yes ☐ No If yes, please explain on a separate sheet.

8. Have you ever attempted or considered suicide? ☐ Yes ☐ No If yes, please explain the circumstances. Include when, where, and how you were treated, and whether treatment was voluntary or involuntary.

9. Do you currently wrestle with suicidal thoughts? ☐ Yes ☐ No If yes, please describe.

10. Have you ever viewed child pornography? ☐ Yes ☐ No If yes, please explain.

11. Do you currently have a prescription for medication related to psychological problems? ☐ Yes ☐ No
If yes, describe your treatment methods. You will be asked to list medications in the Medication Disclosure.

If yes, are you currently taking this medication? ☐ Yes ☐ No

12. Have you taken or been prescribed medication related to psychological problems in the past? ☐ Yes ☐ No
If yes, please list your medications and describe your treatment methods.

_____

_____

_____

13. Are you currently taking any other prescription medications? ☐ Yes ☐ No If yes, you will be asked to list medications in the Medication Disclosure.

14. Do you have health insurance? ☐ Yes ☐ No If yes, please describe your coverage here.

_____

MEDICATION DISCLOSURE

I am currently on the following medications, and these medications are being prescribed and regulated by the following doctor(s):

Medication	Doctor's name	Doctor's phone number

I agree to continue taking these medications under the supervision of my doctor's care throughout my time at IHOPU. I understand that failure to keep taking my medications under my doctor's care is grounds for my immediate dismissal.

Student name _____ Date _____

Signature _____

ACKNOWLEDGMENT OF AGREEMENT

Please acknowledge your agreement with the following by checking each box and signing your name.

☐ I have read, agree with, and will abide by the IHOP–KC internship guidelines (*internships only*).
☐ I have read, agree with, and will abide by the IHOP–KC Missions Base foundational commitments.
☐ I have read and agree with the IHOP–KC vision statement.
☐ I have read and agree with the IHOP–KC statement of faith.
☐ I understand that my program at IHOPU will include practical ministry training and service to others.
☐ I understand that I must secure funds sufficient to cover all my tuition before attending IHOPU.
☐ I understand that I must secure funds sufficient to cover all my personal expenses.
☐ I declare that the information I have provided in my application is true, accurate, and complete.
☐ I understand that providing false information in my application may be grounds for denial of my application and/or dismissal from IHOPU.

Signature _____ Date _____

APPLICATION FEE

A $50 application fee is due with the application packet for administrative processing. Applications from international students require a $125 fee. Application fees are nonrefundable.

Please print.

Applicant name _____

School/Internship _____ Start date _____

Please check the box that applies to the applicant.

☐ U.S. citizen/Legal Permanent Resident ($50) ☐ International ($125)

Payment Options
Payment must be made in US dollars.

1. Make a check or money order payable to International House of Prayer University. Write the applicant's name and school/internship in the memo. Attach to this document.

2. Complete the credit card information below.

Check the box that applies.

☐ Visa ☐ Mastercard ☐ Discover ☐ American Express

Cardholder's name as it appears on the card (please print) _____

Credit card number _____

Billing zip code (US cards only)_____

Expiration date _____ Security code (3-digit code on back of card) _____

Signature _____ Date _____

This page intentionally blank.

IHOPU INTERNSHIP GUIDELINES (INTERNSHIPS ONLY)

Teachability: We ask that every intern be teachable, willing to learn, and sincere in his/her pursuit of holiness.

Internship dating policy: Dating is not permitted while attending an IHOPU internship. The purpose of our internships is focused pursuit of the Lord. We are confident that when interns separate themselves for this short season, they will find that the reward far outweighs the sacrifice. Applicants who are engaged are kindly requested to attend an internship after they are married.

Vacation: No personal breaks are permitted during the internship. Personal breaks include, but are not limited to, ministry trips, weekend trips, family reunions, graduations, weddings, and the like. Interns are expected to plan ahead and keep the internship session an uninterrupted season of consecration and impartation.

Personal appearance: Interns are expected to uphold a clean, modest, and non-distracting appearance in their dress for all meetings, classes, services, and gatherings throughout the IHOP–KC community. We desire to bring glory to Jesus with our bodies and clothing. We also ask that clean, untorn clothing and shoes be worn when on any ministry platform at IHOP–KC.

Health insurance: Applicants should provide their own health insurance coverage. Neither IHOPU nor the internship program are responsible for covering hospitalization, visits to the doctor, or medications.

Vehicle: Interns are responsible for their own transportation and timeliness (i.e., they must be punctual for meetings and classes) whether they have a vehicle or not. We recommend that each intern have access to a reliable vehicle throughout the internship.

Personal expenditures: Interns are required to have sufficient funds to cover all personal and living expenses incurred throughout the internship. Due to the extensive time commitments during the program, interns should not acquire outside employment.

IHOP–KC MISSIONS BASE FOUNDATIONAL COMMITMENTS

For all IHOP–KC staff, IHOPU students, and interns:

We recognize that external rules of behavior are not the highest ideal for any Christian community and desire that our motivation for holiness would be love for Jesus and His people, not rules. In this spirit we affirm the following:

The IHOP–KC community expects all its staff members (all staff, students, and interns), to make a personal commitment to live counter to the prevailing moral laxity of our society by not participating in, advocating, supporting, or condoning sexual activity (heterosexual or homosexual) outside of marriage between a man and a woman, as set forth in the Scripture. Further, we will demonstrate our commitment to Christ and to each other by refraining from the use of tobacco, and the public or social use of alcoholic beverages.

IHOP–KC VISION STATEMENT

We desire:

1. To call forth, train, and mobilize intercessors to live a life of prayer as they preach the gospel, heal the sick, help the needy, make disciples, and seek to bring transformation to society; to make it our aim to personally live as fully devoted disciples of Jesus who operate in the forerunner spirit.

2. To establish a perpetual solemn assembly in Kansas City by gathering corporately to fast and pray, because we recognize this as essential to establishing justice in society.

3. To train others to plant houses of prayer, churches, and/or marketplace ministries as the Spirit leads.

IHOP–KC STATEMENT OF FAITH

We believe only the sixty-six books of the Bible are the inspired and, therefore, inerrant Word of God. The Bible is the final authority for all we believe and how we are to live. (Mt. 5:18; Jn. 10:35, 17:17; 2 Tim. 3:16–17; 2 Pet. 1:20–21)

We believe Jesus Christ is God incarnate, fully God and fully man. He was conceived and born of a virgin, lived a sinless life, and offered Himself as a penal, substitutionary sacrifice for sinners. By His blood shed at the cross, He obtained for us eternal redemption, the forgiveness of sins, and life everlasting. He was raised bodily on the third day and ascended to the right hand of the Father, there to make intercession for the saints forever. (Mt. 1:18–25; Jn. 1:1–18; Rom. 8:34; 1 Cor. 15:1–28; 2 Cor. 5:21; Gal. 3:10–14; Eph. 1:7; Phil. 2:6–11; Col. 1:15–23; Heb. 7:25, 9:13–15, 10:19; 1 Pet. 2:21–25; 1 Jn. 2:1–2)

We believe salvation is by grace alone, through faith alone, in Christ alone. No ordinance, ritual, work, or any other activity on the part of man is required or accepted in order to be saved. This saving grace of God, through the power of the Holy Spirit, also sanctifies us by enabling us to do what is pleasing in God's sight in order that we might be progressively conformed to the image of Christ. (Jn. 1:12–13, 6:37–44, 10:25–30; Acts 16:30–31; Rom. 3:1–4:23, 8:1–17, 31–39, 10:8–10; Eph. 2:8–10; Phil. 2:12–13; Titus 3:3–7; 1 Jn. 1:7, 9)

We believe the Lord Jesus Christ baptizes believers in the Holy Spirit, in whom we are also sealed for the day of redemption. The Holy Spirit regenerates, forever indwells, and graciously equips the Christian for godly living and service. Subsequent to conversion, the Spirit desires to fill, empower, and anoint believers for ministry and witness. We also believe that signs and wonders, as well as all the gifts of the Spirit described in the New Testament, are operative today and are designed to testify to the presence of the kingdom and to empower and edify the Church to fulfill its calling and mission. (Mt. 3:11; Jn. 1:12–13, 3:1–15; Acts 4:29–30; Rom. 8:9, 12:3–8; 1 Cor. 12:12–13; 2 Cor. 1:21–22; Gal. 3:1–5; Eph. 1:13–14, 5:18)

We believe the one true God exists eternally in three persons—Father, Son, and Holy Spirit—and that these, being one God, are equal in deity, power, and glory. We believe God not only created the world, but also now upholds, sustains, governs, and providentially directs all that exists and that He will bring all things to their proper consummation in Christ Jesus to the glory of His name. (Ps. 104:1–35, 139:1–24; Mt. 10:29–31, 28:19; Acts 17:24–28; 2 Cor. 13:14; Eph. 1:9–12, 4:4–6; Col. 1:16–17; Heb. 1:1–3; Rev. 1:4–6)

We believe that when Christians die, they pass immediately into the blessed presence of Christ, there to enjoy conscious fellowship with the Savior until the day of the resurrection and the glorious transformation of their bodies. The saved will then forever dwell in blissful fellowship with their great triune God. We also believe that when unbelievers die, they are consigned to hell, there to await the Day of judgment when they shall be punished in the lake of fire with eternal, conscious, and tormented separation from the presence of God. (Mt. 25:46; Lk. 16:19–31; Jn. 5:25–29; 1 Cor. 15:35–58; 2 Cor. 5:1–10; Phil. 1:19–26, 3:20–21; 2 Thes. 1:5–10; Rev. 20:11–15, 21:1–22:15)

We believe that water baptism and the Lord's Supper are the two ordinances of the Church to be observed until the time of Christ's return. They are not a means of salvation, but are channels of God's sanctifying grace and blessing to the faithful in Christ Jesus. (Mt. 26:26–29, 28:19; Rom. 6:3–11; 1 Cor. 11:23–34; 1 Pet. 3:21)

We believe in the literal second coming of Christ at the end of the age when He will return to earth personally and visibly to consummate His kingdom. We believe the Church will go through the great tribulation with great power and victory. We believe the Church will be raptured at the end of the great tribulation. We also believe in and are praying for a great end-time harvest of souls and the emergence of a victorious Church that will experience an unprecedented unity, purity, and power in the Holy Spirit. (Ps. 2:7–9, 22:27–28; Jn. 14:12; 17:20–26; Rom. 11:25–32; 1 Cor. 15:20–28, 50–58; Eph. 4:11–16; Phil. 3:20–21; 1 Thes. 4:13–5:11; 2 Thes. 1:3–12; Rev. 7:9–14)

We believe Adam was originally created in the image of God, righteous and without sin. As a consequence of his disobedience, Adam's posterity is born subject to both imputed and inherent sin, and all humans are therefore by nature and choice the children of wrath, justly condemned in the sight of God, wholly unable to save themselves or to contribute in any way to their acceptance with God. (Gen. 1:1–3:22; Ps. 51:5; Isa. 53:5; Rom. 3:9–18, 5:12–21; Eph. 2:1–3)

We believe the Church is God's primary instrument through which He is fulfilling His redemptive purposes in the earth. To equip the saints for the work of ministry, God has given the Church apostles, prophets, evangelists, pastors, and teachers. We also affirm the priesthood of all believers and the importance of every Christian being joined with and actively involved in a local community of the saints. We believe women, no less than men, are called and gifted to proclaim the gospel and do all the works of the kingdom. (Mt. 16:17–19; Acts 2:17–18, 42; Eph. 3:14–21, 4:11–16; 1 Tim. 2:11–15; Heb. 10:23–25; 1 Pet. 2:4–5, 9–10)

We believe God has called the Church to preach the gospel to all nations, to especially remember the poor, and to minister to their needs through sacrificial giving and practical service. This ministry is an expression of the heart of the Lord Jesus Christ and is an essential part of the kingdom of God. (Isa. 58:6–12, 61:1; Mt. 5:1–7:28; 28:18–20; Lk. 4:18, 21:1–4; Gal. 2:10; 1 Tim. 6:8)

We believe Satan, originally the great and good angel Lucifer, rebelled against God, taking a multitude of angels with him. He was cast out of God's presence and is at work with his demonic hosts to establish his counter-kingdom of darkness, evil, and unrest on earth. Satan was judged and defeated at the cross of Christ and will be cast forever into the lake of fire which has been prepared for him and his angels. (Isa. 14:10–17; Ezek. 28:11–19; Mt. 12:25–29, 25:41; Jn. 12:31, 16:11; Eph. 6:10–20; Col. 2:15; 2 Pet. 2:4; Jude 6; Rev. 12:7–9, 20:10)

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INTERNATIONAL HOUSE OF PRAYER UNIVERSITY
2901 S. US Highway 71, Grandview, MO 64030
Phone: 816.763.0243 | Fax: 816.763.0439 | admissions@ihopu.org

PASTORAL RECOMMENDATION FORM

TO BE COMPLETED BY THE APPLICANT

Name _____ Phone _____

IHOPU program and start date _____ Email _____

Under the Family Educational Rights and Privacy Act, students enrolled at IHOPU have the right to inspect their files upon request. In order for the person from whom you have requested this letter of reference to know if you will have access to this letter or if it will be held in confidence, please sign one of the statements below. Waiving your right to see this letter is not a requirement for admission.

Please check only one of the options below and sign and date your option.

☐ I understand that students enrolled in IHOPU have the right to inspect their file upon request under the Family Educational Rights and Privacy Act. I, however, hereby DO WAIVE my right of access to this letter of reference.

Signature _____ Date _____

☐ I DO NOT WAIVE my right of access to the letter of reference.

Signature _____ Date _____

TO BE COMPLETED BY THE PASTORAL REFEREE

The pastoral referee must be unrelated to the applicant and must have known the applicant for at least one year. Please return this form directly to the applicant in a sealed and signed envelope so that they may submit all components together in one packet.

If you have any questions, please email admissions@ihopu.org.

Name _____

Church name _____

Staff position _____

Church phone _____

Church address _____

City, state, zip/post code, country _____

Contact phone _____

Email _____

1. How long have you known the applicant? How well do you know him/her?

2. Please describe the applicant's level of involvement in your church.

3. What is the applicant's effect on his/her peers?

4. Has the applicant served your congregation in any capacity? ☐ Yes ☐ No If yes, please give a brief description.

5. IHOPU programs consist of a heavy weekly schedule. Do you foresee difficulties for the applicant with a schedule combining high expectations and extensive time constraints?

6. What is your assessment of the applicant's ability to handle situations involving change, crisis, and correction?

7. From your observation, what are the strengths and spiritual gifts of the applicant?

8. From your observation, what are the applicant's weaknesses and struggles?

9. Are you aware of any complex family or relational factors that might affect the applicant's time at IHOPU?

10. Please assess the applicant in the following areas:

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual maturity	☐	☐	☐	☐	☐
Devotion to Jesus Christ	☐	☐	☐	☐	☐
Integrity and honesty	☐	☐	☐	☐	☐
Openness to correction	☐	☐	☐	☐	☐
Self-discipline	☐	☐	☐	☐	☐
Working without supervision	☐	☐	☐	☐	☐
Willingness to serve	☐	☐	☐	☐	☐
Ability to work with others	☐	☐	☐	☐	☐
Communication skills	☐	☐	☐	☐	☐
Leadership skills	☐	☐	☐	☐	☐
Reliability	☐	☐	☐	☐	☐
Teachability	☐	☐	☐	☐	☐
Emotional stability	☐	☐	☐	☐	☐
Physical health	☐	☐	☐	☐	☐
Family life	☐	☐	☐	☐	☐

Additional comments or explanations:

_____

_____

_____

11. Would you have the applicant on your staff? ☐ Yes ☐ No Why or why not?

_____

_____

_____

12. Do you recommend this applicant for IHOPU?
☐ Highly recommend ☐ Recommend ☐ Recommend with reservations* ☐ Do not recommend*

*Please explain:

_____

_____

_____

Additional comments:

_____

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_____

Signature _____ Date _____

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INTERNATIONAL HOUSE OF PRAYER UNIVERSITY
12901 S. US Highway 71, Grandview, MO 64030
Phone: 816.763.0243 | Fax: 816.763.0439 | admissions@ihopu.org

PERSONAL RECOMMENDATION FORM

TO BE COMPLETED BY THE APPLICANT

Name _____ Phone _____

IHOPU program and start date _____ Email _____

Under the Family Educational Rights and Privacy Act, students enrolled at IHOPU have the right to inspect their files upon request. In order for the person from whom you have requested this letter of reference to know if you will have access to this letter or if it will be held in confidence, please sign one of the statements below. Waiving your right to see this letter is not a requirement for admission.

Please check only one of the options below and sign and date your option.

☐ I understand that students enrolled in IHOPU have the right to inspect their file upon request under the Family Educational Rights and Privacy Act. I, however, hereby DO WAIVE my right of access to this letter of reference.

Signature _____ Date _____

☐ I DO NOT WAIVE my right of access to the letter of reference.

Signature _____ Date _____

TO BE COMPLETED BY THE PERSONAL REFEREE

The pastoral referee must be unrelated to the applicant and must have known the applicant for at least two years. Please return this form directly to the applicant in a sealed and signed envelope so that they may submit all components together in one packet.

If you have any questions, please email admissions@ihopu.org.

Name _____

Age _____

Phone _____

Address _____

City, state, zip/post code, country _____

Email _____

1. How long have you known the applicant? How well do you know him/her?

2. What relationship do you have to the applicant?

3. Please describe your understanding of the applicant's intentions for his/her time as an IHOPU student or intern.

4. IHOPU programs consist of a heavy weekly schedule. Do you foresee difficulties for the applicant with a schedule combining high expectations and extensive time constraints?

5. From your observation, what are the strengths and spiritual gifts of the applicant?

6. From your observation, what are the applicant's weaknesses and struggles?

7. Are you aware of any complex family or relational factors which might affect the applicant's involvement at IHOPU?

8. Please assess the applicant in the following areas.

	Uncertain	Weak	Fair	Good	Outstanding
Spiritual maturity	☐	☐	☐	☐	☐
Devotion to Jesus Christ	☐	☐	☐	☐	☐
Integrity and honesty	☐	☐	☐	☐	☐
Openness to correction	☐	☐	☐	☐	☐
Self-discipline	☐	☐	☐	☐	☐
Working without supervision	☐	☐	☐	☐	☐
Willingness to serve	☐	☐	☐	☐	☐
Ability to work with others	☐	☐	☐	☐	☐
Communication skills	☐	☐	☐	☐	☐
Leadership skills	☐	☐	☐	☐	☐
Reliability	☐	☐	☐	☐	☐
Teachability	☐	☐	☐	☐	☐
Emotional stability	☐	☐	☐	☐	☐
Physical health	☐	☐	☐	☐	☐
Family life	☐	☐	☐	☐	☐

Additional comments or explanations:

_____

_____

_____

9. Do you recommend this applicant for IHOPU?
☐ Highly recommend ☐ Recommend ☐ Recommend with reservations* ☐ Do not recommend*

*Please explain:

_____

_____

_____

10. Do you support the applicant's decision to move to Kansas City as an IHOPU student or intern? ☐ Yes ☐ No
Why or why not?

_____

_____

_____

Additional comments:

_____

_____

_____

_____

_____

_____

Signature _____ Date _____

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INTERNATIONAL HOUSE OF PRAYER UNIVERSITY

INTERNSHIPS APPLICATION ADDENDUM

CHILDREN

1. I would like to register my children ages 1–12 (walking 1-year-olds) for IHOP–KC children's tracks.

Name	Gender	Date of birth
_____	☐ M ☐ F	_____
_____	☐ M ☐ F	_____
_____	☐ M ☐ F	_____
_____	☐ M ☐ F	_____

2. Do you have any children ages 13–17 who you would like to participate in the internship program with you?
   ☐ Yes ☐ No

If yes, please have them include a written testimony and statement of what they hope to get out of the internship.

3. Do any of the children that are attending require medical care, have special needs or behavioral issues, or need medication? ☐ Yes ☐ No

If yes, please attach a separate sheet of paper listing any issues, medications, or other concerns.

FINANCES

1. How do you plan on paying the full amount of the program tuition?

_____

_____

_____

2. If you are applying for the One Thing or Fire in the Night internship, program tuition includes three meals per day in the cafeteria and dorm-style housing. Beyond tuition, how will you provide for expenses such as laundry, phone, personal supplies, and recreation?

_____

_____

_____

3. If you are applying for the Intro to IHOP–KC or Simeon Company internship, program tuition does not include any housing or meals. You must meet the following minimum financial requirements:

   Single: $700/month
   Married: $1,400/month
   Married with children: $1,600/month

Beyond tuition, please explain your financial plans for support, insurance, transportation, housing, food, recreation, and other expenses.

_____

_____

_____

DATING

1. Are you currently engaged or in a dating relationship? ☐ Yes ☐ No If yes, answer the following questions.

2. If accepted into the internship, please explain how you plan on adjusting your dating relationship according to the internship dating policy (see the IHOPU Internship Guidelines in the main application form).

_____

_____

3. Is the person you are dating a student at IHOPU or applying for an internship or program at the same time as you?
☐ Yes ☐ No If yes, please give details.

_____

_____

MUSICAL TRAINING

1. Are you a singer? ☐ Yes ☐ No Please rate your level of experience.

	None	Minimal	Moderate	Proficient
History of taking vocal lessons	☐	☐	☐	☐
Experience with a live band	☐	☐	☐	☐
Experience with performing	☐	☐	☐	☐
Proficiency with your voice	☐	☐	☐	☐
Experience leading worship	☐	☐	☐	☐

Additional comments:

_____

_____

_____

2. Are you a musician? ☐ Yes ☐ No Please rate your level of experience on your primary instrument.

Primary instrument: _____

	None	Minimal	Moderate	Proficient
Sight reading	☐	☐	☐	☐
Playing by ear	☐	☐	☐	☐
Reading notes	☐	☐	☐	☐
Reading chords	☐	☐	☐	☐
History of taking music lessons	☐	☐	☐	☐
Experience with a live band	☐	☐	☐	☐
Proficiency on your instrument	☐	☐	☐	☐
Experience leading worship	☐	☐	☐	☐

Additional comments:

_____

_____

_____

3. Do you play any other instruments? ☐ Yes ☐ No Please list them below in order of proficiency.

_____

_____

_____

_____

4. Do you plan to audition for a worship team while you are at IHOP–KC? ☐ Yes ☐ No
If yes, please explain in what capacity you are hoping to be involved.

_____

_____

_____

_____

_____

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BACKGROUND CHECK AUTHORIZATION

Each intern will have service hours during their International House of Prayer University internship. Some of these hours may include working with the children's ministry of the International House of Prayer. We therefore require that each applicant fill out and sign this form to authorize a background check. This written authorization is required to complete the application process.

Name _____

Date of birth _____

Social security number _____

Driver's license number _____

Issuing state of driver's license _____

Complete address as listed on driver's license

_____

Have you ever been reported to a Social Service Agency/Department of Family Services? ☐ Yes ☐ No
If yes, please explain.

_____

_____

Have you ever been accused of or reported for physical or sexual abuse? ☐ Yes ☐ No If yes, please explain.

_____

_____

I attest that the above information is true and correct to the best of my knowledge. I hereby give permission to the International House of Prayer of Kansas City (IHOP–KC) to investigate my background and check references as it relates to my working with children and youth during the internship I am applying for. I understand this could also include a police background check as well as investigation by professional agencies. I also understand that I may withhold my permission and that in such a case, no investigation will be done and my application for the internship will not be processed further.

Signature _____ Date _____

_____
Name of internship (please print)