



IHOP Atlanta Training Program Application

*'And you shall love the LORD your God with all your heart, with
all your soul, with all your mind, and with all your strength.'*
Mark 12:30

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All forms (except reference forms) to be filled out by Intro applicant only.

Please e-mail any questions regarding this application to intro@ihop-atlanta.com

Application Process Simplified:

The application has nine components:

- 1) Application form
- 2) Personal Photograph
- 3) Your 1-2 page personal testimony, typed. (*See application for instructions*)
- 4) Background Check Release Form
- 5) Gifting & Experience Form
- 6) Musician / Singer Information
- 7) \$50 **Non-refundable** application processing fee. (Make check payable to IHOP Atlanta with "Intro" in the memo line)
- 8) Personal Reference Form (To be mailed in by Reference)
- 9) Pastoral Recommendation Form (To be mailed in by Pastor)

Above items 1-7 must be sent by the applicant to the following address in one envelope:

IHOP Atlanta
Intro Application
1625 Collins Hill Road
Lawrenceville, GA 30043

The **application deadline** is ***four weeks prior to the start date*** of the Intro program for which you are applying. Applications must be post-marked by the application deadline in order to be considered for acceptance.

Upon reviewing your application, we will contact you by e-mail or telephone to set up an appointment for a phone interview with you.

We will notify you of your acceptance within thirty days of the interview.

If you are single and would like to apply for IHOP Atlanta housing, download the **Intro Housing Application** and *include it in the envelope* with your Intro Application packet. IHOP Atlanta housing is not available for married applicants, so those who are married are responsible for finding their own housing. (Please refer to the Intro web page for additional information about housing.)

Intro Guidelines

Teachability: One of the most important requirements for acceptance into Intro is that the applicant should have a teachable spirit. Each Intro participant should be willing to receive instruction from teachers with a desire for truth, even challenging truths, and a willingness to study it out to form a personal belief regarding what has been taught (Isaiah 1:18, Proverbs 2). Teachability also runs into community life and each Intro participant should be willing to submit to the correction and instruction of the Intro leadership team without offense (Heb. 13:7).

Vacation: With the exception of those break times scheduled by the Intro leadership team, and those agreed upon by the Intro Director with individual Intro participants prior to the start of the program, additional personal vacations will not be permitted during Intro. Examples of such additional vacations would include: family reunions, graduations, weddings, concerts, other personal events, etc. Intro is to be valued as a season of consecration unto the LORD. Attendance during all scheduled Intro hours is required in order to remain in the program. Exceptions will be made for illnesses and family emergencies.

Health Insurance: Each applicant should provide for his or her own health insurance coverage. Neither IHOP Atlanta nor the Intro program will be able to cover hospitalization or visits to a physician or other health professional.

Vehicle: Since the scheduling of ministry assignments are both frequent and varied, each Intro participant must provide their own reliable transportation for the duration of Intro. Exceptions are possible with prior approval. All Intro participants who do not have a vehicle are still held responsible for their own transportation needs. (i.e., punctuality to meetings, classes, etc.)

Vehicle Insurance: Liability insurance is required for every vehicle in the State of Georgia. Even if you are from another state or country, it will be your responsibility to ensure that your vehicle is adequately insured during your stay in Atlanta.

Laptop Computers: Much of the day-to-day communication in the IHOP Atlanta community takes place over the internet through e-mail. It is highly recommended that Intro participants have a laptop computer (no desktop computers) in order to journal, study, and communicate. We have found that a laptop is a useful part of individuals' ongoing study of the Scriptures. Laptops should have a wireless network card and a Bible study program.

Addictions: You are expected to be free of any personal addictions (to alcohol, drugs, tobacco, pornography, etc.) before applying for Intro. Due to the intensity of this program, it is recommended that you be free from any such addictions for at least six months prior to your arrival. Our desire is for Intro participants to be able to focus their undivided attention upon the Lord, rather than struggling with frequent temptations in the area of a recently-overcome addiction.

Attendance: Attendance during all scheduled Intro hours is required in order to remain in the program. Exceptions will be made for illnesses and family emergencies.

Finances: Because this training program requires a heavy time commitment, **participants will likely find it difficult to hold down outside employment during Intro.** For this reason, each Intro participant must have sufficient funds to cover any personal expenses that they may incur throughout the duration of Intro. The total amount needed will vary depending on each participant's personal preferences, financial obligations, and spending habits. Intro participants will be required to purchase their own gasoline, food, class supplies (except text books), and cover their own outside expenses (such as housing, health insurance, cell phone payments, car insurance, etc.). Please assess these things as you prepare to come to Intro and plan accordingly.

Intro Cost Information

The **registration cost** for Intro will be \$1050.00 for individuals, \$1500 for couples, and \$400 for each additional family member enrolled.

Within two weeks of acceptance into Intro, a \$200.00 non-refundable deposit is required. This deposit confirms your intent to attend Intro and secures your place in the program.

The remaining cost is due before or at registration. This amount may be paid in cash, by check or by money order. IHOP cannot be responsible for cash lost in the mail, for this reason, please bring all cash payments to accounting in person. Interns need to bring 100% of this amount to register on the internship start date.

Breakdown of Tuition Costs and Payment Deadlines:

(4 weeks prior to start date)

Sent with application packet: (non-refundable application fee).....\$50
Processing fee for application.

2 weeks after acceptance: (non-refundable deposit).....\$200
This is confirmation of your acceptance and intent to attend, and secures you a place in the program.

2 weeks prior to start of Intro: Remainder of 3-Month Tuition:
Includes tuition for Intro, Ministry School Classes, conferences, books, and printing fees.

Individual.....	\$1,050
Married Couple.....	\$1,500
Children’s Track.....	\$400 per child 1-12 yrs old

Children cannot sit with parents during classes.

Additional **housing costs and payment deadlines** for singles that are applying for **IHOP Housing** are found in the Intro Housing Application.

Housing Application Link:

http://www.ihop-atlanta.com/assets/pdf/intro09housingapplication_p.pdf

Daniel Academy

Educational Enrichment for Homeschool Families

Daniel Academy Atlanta is a unique, family partnership school that cultivates a lifestyle of prayer and fasting, prophetic wisdom and academic excellence into our children. We serve students in Kindergarten 4 through 8th grade.

We partner with homeschool families to enrich the quality of their children's academic, biblical, and creative worship education. Our goal is to develop present day "Daniel's" who understand the times we live in and who will influence society.

Our desire is to build a strong community in which we can all work together to allow the river of life to flow through our families, and into the world around us. Our heart's vision is for the Kingdom of God to come and for Christ to be glorified through our families, our school, and our community.

At Daniel Academy, our teachers are a "living curriculum" within each of their classrooms, serving as role models for Christian living and thinking. Our teacher's challenge and support students in their spiritual, intellectual, emotional, social, and physical development. Teachers integrate scripture and scriptural principles into every facet of our educational program. We believe that teaching in the classroom should be creative, interesting, and hands-on. We understand the learning process to involve exploration, discovery, imagination, comprehension, curiosity, critical thinking, and practical application.

Daniel Academy Atlanta is located at the IHOP Atlanta Missions Base.

Daily Schedule: Tuesday, Wednesday, Thursday

- 9am - 12pm: Forerunner Class
- 12pm - 2pm: Lunch
- (1pm - 2pm): Life of David (Optional)
- 2pm - 3pm: Elective
- 3pm - 4pm: Worship Assembly

8. When did you become a Christian? _____

9. Details of Church background [Please include name(s), denomination(s), date(s).]

10. Are you currently involved in a local church? [] Yes [] No (if no, please explain)

11. Current local church: how long have you been there; list areas of current involvement:

12. History of previous ministry involvement:

13. What would you consider to be your gifts and talents (spiritual and natural)?

14. What would you consider to be your weaknesses?

15. List some of your hobbies and interests:

16. Please assess yourself in the following areas:

Personal Assessment Areas	Uncertain	Weak	Fair	Good	Very Good	Outstanding
Spiritual Maturity						
Devotion to Christ						
Integrity & Honesty						
Openness to Correction						
Self - Discipline						
Willingness to Serve						
Ability to Work With Others						
Communication Skills						
Courtesy						
Leadership Skills						
Reliability						
Teachability						
Emotional Stability						
Physical Health						
Family Life						

Comment on any of the above:

Health Information

Please check if you have had any occurrences (minimal to maximal) of any of the following:

<input type="checkbox"/>	ADD	<input type="checkbox"/>	Alcohol Abuse
<input type="checkbox"/>	Mild Depression	<input type="checkbox"/>	Drug Abuse (including cigarettes & prescription drugs)
<input type="checkbox"/>	Chronic Depression	<input type="checkbox"/>	Pain Killers
<input type="checkbox"/>	Chronic Fatigue Syndrome	<input type="checkbox"/>	Eating Disorders (Bulimia, Anorexia, Diet Obsessive)
<input type="checkbox"/>	Fibromyalgia	<input type="checkbox"/>	Seizures
<input type="checkbox"/>	Sleeping Disorder (Including Insomnia)	<input type="checkbox"/>	Asthma
<input type="checkbox"/>	Snoring	<input type="checkbox"/>	Medical Allergies

Other: _____

If any of the above items were checked, please comment:

17. Have you ever attempted or considered suicide? If so, when? Comment on the event(s) here:

18. Do you have any physical disabilities or considerations that require special care?
(Please explain)

19. Please tell us if you have had or have any life-controlling issues. (mental, emotional and/or relational)

20. Do you have insurance? If so, what kind(s)?

21. What led you to desire to come to IHOP Atlanta for Intro? (How did you hear about us? What events led you to apply as an Intro participant? Why do you want to come?)

22. Single Intro participants who live in IHOP Housing will be in a dorm-style situation. Do you foresee any difficulties with this type of situation? If so, how do you plan on handling it?

23. Do you have a vehicle to bring to Intro? Yes No

24. How do you plan on paying the full tuition amount?

25. Your tuition provides, teachings, and training materials. (It does not provide for housing, food, gas, insurance, clothing, laundry, personal expenses, or entertainment money.) How do you plan on financially support yourself apart from the tuition?

26. How does your family feel about you attending Intro?

27. In case of an emergency, whom may we contact?

_____(_____)_____(_____)_____
 Emergency Contact's Name Home Phone Number Cell Phone Number
 (_____)_____
 Work Phone Number Emergency Contact's Relationship to Applicant

28. Please acknowledge your agreement with the following statements by initialing each of the boxes and signing your name below:

	I have read and agree with the IHOP Atlanta Statement of Faith (please refer to IHOP Atlanta's website: www. ihop-atlanta.com)
	I understand that I am to have a foundational knowledge of the basics of the Christian faith and feel that I do.
	I have read and agree with the Intro Guidelines (See Intro Guidelines, page?)
	I understand that I must function as a community member by respecting other individuals, their belongings, and IHOP property; and by actively participating in community cleaning and work projects.
	I understand that one of the means by which I will be expected to minister to the LORD throughout the duration of Intro is through serving others.
	I understand that outside employment during Intro would be difficult to schedule and therefore I must secure finances sufficient to cover my tuition and non-tuition expenses in advance.
	I understand that Intro is part of a much larger Missions Base, which is in constant transition and change, and that this may affect my experience.

 Your Name

 Your Signature

 Date

**Background Check Consent & Release
International House of Prayer (IHOP) Atlanta Internships**

In connection with your application and anytime during your enrollment/employment at the International House of Prayer Atlanta, you authorize Midwest Backgrounds, Inc ("MBI") to obtain and furnish reports from various agencies and organizations regarding your personal, residential, criminal, driving, lawsuit, education, character and reputation records and history any time during your term of your enrollment/employment with IHOP Atlanta.

MBI DOES NOT INDEPENDENTLY ANALYZE, EVALUATE OR SUMMARIZE THE CONTENTS OF ANY SUCH REPORTS.

The amended Fair Credit Reporting Act (1997) requires that we inform you that a background check may be conducted as part of our enrollment/employment screening process and/or during enrollment/employment. The main objective of the background check is to verify information you provided on your application or during the interview process. **In the event that any report is utilized in making an adverse decision regarding your potential enrollment/employment, MBI will provide you with an address to obtain a copy of the information or report and a description in writing of your rights under the law prior to making such an adverse enrollment/employment decision.** We will provide you with the disclosure within five (5) business days of the date on which we receive your written request.

I hereby authorize and request all credit reporting agencies, circuit courts and their officers, officials and employees, state agencies and their officials and employees, local and state law enforcement agencies, federal law enforcement agencies, International law enforcement agencies, department of motor vehicle facilities, past/present employers and educational and banking institutions, labor and worker's compensation departments, and any other agency or person having information relevant to my background for employment/ enrollment purposes, to release any and all information to the International House of Prayer Atlanta upon MBI's request. I further release, hold harmless and agree to indemnify any of the foregoing from any and all liability, injury, damages, claims, demands, causes of action, suits, judgments and executions, whether sounding in tort, contract, equity or law, which I and my heirs, personal representatives, assigns, executors and administrators now have, or in the future may have, against any of the foregoing for providing the requested reports to MBI.

CALIFORNIA SEARCHES: Under Section 1786.22 of the California Civil Code, you have the right to request to MBI, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you which MBI has previously furnished within the two-year period preceding my request. You may view the file maintained on you by MBI during normal business hours. You may also obtain a copy of this file upon submitting proper identification paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone. The information will be obtained by MBI Worldwide 101 N Park Ave, Suite 200, Herrin, IL 62948, (618) 942-8808.

PLEASE TYPE OR PRINT LEGIBLY

Applicant Name:

Last First Middle

Address:

Street City State Zip County

Date of Birth: ____/____/____ Driver's License # _____
State _____

SS#: _____ Male / Female (Circle One)

Race _____

Home Addresses for the Past 7 Years:

Street Address	City	State	County	Dates	Mo/Year
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Previous Felony/Misdemeanor Criminal Convictions? ____Yes ____No

By law you are not obligated to disclose sealed or expunged records of conviction or arrest.

Charge/Conviction	County	State
Dates	Mo/Year	
_____	_____	_____
_____	_____	_____
_____	_____	_____

By my signature below, I hereby authorize Midwest Backgrounds, Inc. to obtain my personal and criminal history. I hereby state that I have read this document in detail and clearly understand the terms and rights that I have granted to M.B.I. for the collection and release of the aforementioned information.

Applicant Signature _____ Date _____

Please give Summary of Rights to applicant
© 2007 Midwest Backgrounds, Inc.

Giftng & Experience

Name: _____ D.O.B.: _____ Age: _____

Marital Status: Single Married Divorced Widow/er

Highest Level of Education: High School AS BS/BA MS/MBA PhD Other

Major / Discipline: _____

Please "X"	Giftng / Experience	Please Specify	Years of Experience
	Accounting / Financial		
	Administrative / Clerical		
	Bookstore		
	Computers (Microsoft, Excel, Access)		
	Construction / Maintenance		
	Counseling		
	Creative Writing		
	Dance		
	Dance / Drama / Production		
	Engineering		
	Event Planning / Coordination		
	First Aid / Certified EMT		
	Foreign Language		
	Grant Writing		
	Graphic Design		
	Home School Instructor		
	Housekeeping / Cleaning		
	Human Resources / Staffing		
	I.T. (Information Technology)		
	International Missions		
	Internship Management / Coordination		
	Journalism / Editing		
	Legal		
	Managerial		
	Marketing / Sales		
	Media		
	Medical		
	Nursery		
	Painting		
	Pastoral		
	Projection / PowerPoint		
	Sign Language		
	Sound Technician		
	Teaching – Adult learners		
	Teaching – Child learners (age 1-5)		
	Teaching – Child Learners (Age 6-12)		

Musician and Singer Information

**Being approved for instruments/vocals does not affect your acceptance into Intro.*

We are looking for intercessors whose gifting flows out of a heart of worship:

- Our expectation for our worshippers is that we develop excellence of heart and skill, presenting our worship in a spirit of humility.
- Our desire is to be skillful in leading others into the offering of high praise to our God, of which praise He is so worthy. The development of these skills takes time and dedication.
- We are committed to the journey of discovering the most effective ways that we can worship Him with overflowing hearts, dedication, and skill.

After the first month of Intro, Intro participants will have an opportunity to try out for worship teams and, if approved, may be invited to join an IHOP Atlanta Worship Team. Live tryouts occur at IHOP Atlanta every month. If you think there is any chance you will be interested in trying out at some point during Intro, please fill out the following information.

Singer? Yes No

If so, describe your experience:

Instrumentalists? Yes No

Instrument(s)_____

If so, describe your experience:

Have you led worship? Yes No

If so, describe your experience:

Please acknowledge you agree with the following statements by checking the boxes provided.

I understand that I may need to have more training before singing/playing with an IHOP Atlanta Worship Team.

I set my heart to love the Lord with my gifts, whether or not that involves singing or playing an instrument on the platform.

Signature: _____ Date: _____

Personal Reference Form

THIS SECTION TO BE COMPLETED BY THE APPLICANT:

Last Name: _____ First Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ E-Mail: _____

To the applicant: You may waive your right to see this character reference with the understanding that none of the information within will be disclosed to you. Check the box below which represents your wishes. This will in no way affect your acceptance to Intro. **Please note: Failure to indicate a choice is the same as checking the "I do not waive" box.**

- Yes, I waive my right to see this character reference.
- No, I do not waive my right to see this character reference.

To the Personal Reference:

This recommendation form is to be completed by a friend (not a spouse or relative) who has known the applicant for at least 5 years. If you have any questions, please email: intro@ihop-atlanta.com. Thank you for your involvement in this important phase of the applicant's life.

Your Name: _____ Phone: (____) _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone #: _____

1. How long have you known the applicant? _____

How well? [] Very Well [] Fairly Well [] Casually [] By name/sight

2. What is the relationship between you and the applicant? _____

3. What are the strengths and spiritual gifts of the applicant, according to your observation?

4. What is your assessment of the applicant's weaknesses?

5. Are there any complex family or relational factors which might affect the applicant's service in Intro at the International House of Prayer Atlanta?

6. Please try to assess the following areas based on your knowledge of the applicant.

Personal Assessment Areas	Uncertain	Weak	Fair	Good	Very Good	Outstanding
Spiritual Maturity						
Devotion to Christ						
Integrity & Honesty						
Openness to Correction						
Self- Discipline						
Willingness to Serve						
Ability to Work With Others						
Communication Skills						
Courtesy						
Leadership Skills						
Reliability						
Teachability						
Emotional Stability						
Physical Health						
Family Life						

Comments on any of the above:

7. Recommendation of this applicant for Intro at IHOP Atlanta:

Highly Recommend

Recommended

Recommend with reservations

Do not recommend

Please explain your recommendation:

Signature: _____ Date: _____

Upon completion of this form, please send to:

IHOP Atlanta
Intro Personal Reference
 1625 Collins Hill Road
 Lawrenceville, GA 30043

IHOP Atlanta Intro
 1625 Collins Hill Road
 Lawrenceville, GA 30043

intro@ihop-atlanta.com
 www.ihop-atlanta.com
 678.325.0596

Pastoral Recommendation- Intro

THIS SECTION TO BE COMPLETED BY THE APPLICANT:

Last Name: _____ First Name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ E-Mail: _____

To the applicant: You may waive your right to see this character reference with the understanding that none of the information within will be disclosed to you. Check the box below which represents your wishes. This will in no way affect your acceptance to Intro.

Please note: Failure to indicate a choice is the same as checking the "I do not waive" box.

- Yes, I waive my right to see this character reference.
- No, I do not waive my right to see this character reference.

Note: It is the responsibility of the applicant to give / email this pastoral recommendation to the pastor

Name of Pastor: _____

Name of Church: _____

City: _____ State: _____ Zip: _____

Email: _____ Home Phone: _____

THIS SECTION TO BE COMPLETED BY THE PASTOR:

To the Pastoral Reference: This recommendation form is to be completed by the applicant's closest (present or former) pastor. In the case that the applicant's father or mother is the pastor, another staff minister should act as pastoral reference.

While it is not required or expected that any IHOP Atlanta Intro participant or staff member consider IHOP their church family, we recognize it is possible that, as a result of their time spent at IHOP, they may desire to make that transition. If this individual felt led to make such a transition we would ask you to consider blessing and releasing them to this unique calling. If you have any questions, you may email them to info@ihop-atlanta.com. Thank you for your involvement in this important phase of the applicant's life.

1. How long have you known the applicant?

2. How well do you know the applicant?

Very well Fairly well Casually By name/sight

3. Please describe the applicant's level of church involvement:

(Check all that apply)

Regular Cooperative Interested Irregular Uninvolved Distant

IHOP Atlanta Intro
1625 Collins Hill Road
Lawrenceville, GA 30043

intro@ihop-atlanta.com

www.ihop-atlanta.com

678.325.0596

4. Has the applicant served your congregation in any capacity?

Yes No

If so, Please give a brief description:

5. What are the strengths and spiritual gifts of the applicant according to your observation?

6. What is your assessment of the applicants' weaknesses?

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

Positive Neutral Negative Unknown

8. Are there any complex family factors that might affect the applicant's service at the International House of Prayer Atlanta?

9. My recommendation for this applicant to participate in Intro at the International House of Prayer Atlanta:

Highly recommend

Recommend with reservations

Recommend

Do not recommend

Pastor's Signature

Date

Upon completion of this form, please send to:

**IHOP Atlanta
Intro Personal Reference
1625 Collins Hill Road
Lawrenceville, GA 30043**