

Summer Ministry Initiative Application



NORTH AMERICA
INDIGENOUS MINISTRIES

USA - PO Box 499
Sumas, WA 98295
604-850-3052

E-mail: recruitment@naim.ca

Website: www.naim.ca

Canada - PO Box 220, Stn A
Abbotsford, BC V2T 6Z6
604-850-3052

Please note: To couples who are applying together, one application per person must be submitted

Name: Gender:

Birth Date: Marital Status:

Mailing Address:

E-mail Address: Phone No:

Pastor/Spiritual Leader:

E-mail Address: Phone No:

Family

Name of parents or next of kin for emergency:

Address /phone number:

Names and ages of any children attending:

Please tell us why you want to be part of this SMI team: Attach additional pages or a Word document as required.

What do you expect to accomplish through this SMI experience?

Statement of Faith: www.naim.ca/Statement-of-Faith

Carefully read NAIM's Statement of Faith.

Are you comfortable agreeing with it?

- Yes
 No

If you have reservations, please explain:

Canadian Immigration Information:

Citizenship:

Birth Place:

Status (if not Canadian or US citizen):

Do you have a police record? (if yes, attach explanation) Yes
 No

Tell us the story of your journey to and with Jesus:

Attach additional pages or a Word document as required.

Ministry Preference:

Village

Urban

Any

Duration:

3-Week: Option 1

3-Week: Option 2

7-Week

References:

List names, phone numbers and e-mails of two people other than your spiritual leader to whom we will talk with to help us understand your suitability for this internship.

I hereby give permission for NAIM to contact the individuals I have listed as my reference. The purpose of this contact would be to verify information pertinent to my application. These persons are aware that you will contact them and have my permission to discuss information regarding my current and/or previous employment.

Applicant's signature: Date:

Reference 1:

Name:

E-mail Address: Phone No:

Reference 2:

Name:

E-mail Address: Phone No:

If accepted, you must have adequate health and accident insurance valid in Canada. Please sign here that you understand that **North America Indigenous Ministries (NAIM)** shall not be liable for any of your medical costs due to accident or illness.

Applicant's signature: Date:

\$20 non-refundable application fee

Included

Please note, application deadline is May 1st