Application for TBC GAP Year

Where do you want to spend your gap ye			
First choice	Second choice		
Name (as on passport)			
Date of Birth			
Address			
City S	State	Zip	
Home phone		Cell Phone	
Email			
Parent's Names			
Parent's Email			
Parent's Address			
Parent's Phone			
Non-relative Emergency Contact Name _			
Relationship			
Church you Attend			
Pastor's Name	Church Phone		
Church Address			
City State			Zip
Years you have attended this church			
High School		Graduation Y	ear
College/University			
ý <u> </u>			
Most Recent Employer		Dates	to
	Reason for Leaving		
Previous Employer			
Position	Reason for Leaving		
Ministries in Your Church and Community	, Vau	Have Canvading	
Ministries in Your Church and Community	, 100		
		How Long?	
		I IOW LONG:	

Briefly Describe Your Sal	vation Experience:	
What are Your Gifts and	Talents?	
As a student in GAP Yea	r, What is Your Greatest Asse	t?
What is Your Greatest W	eakness?	
		Year
Country	Length of Time	Year
What Are You Expecting	from a Gap Year?	
Explain How You Feel th	e Lord is leading in Your Life	
Provide Three Reference	es (Non-relatives):	
Name		Relationship
		Relationship
Name	Phone	Relationship
Applicant's Signature		Date