



PERSPECTIVES

ON THE WORLD CHRISTIAN MOVEMENT

Office Use Only	
Date Rec'd:	_____
Amount Paid:	_____
Cash/Check #:	_____
€	Acceptance Letter Sent
References Received (circle)	
Pastor	Co-Worker

COORDINATOR WORKSHOP Application

Please type or print legibly

I am applying for the Workshop to be held at:

_____ on _____
City & State *Date (include year)*

PERSONAL

Name _____
Last First (Maiden Name) Middle Initial Nickname

*Address _____
Street City State Zip Country

*Valid for 1 year or permanent address

Home Church _____ Denomination/Affiliation _____

Spouse's name _____ Attending? Yes No Home Phone _____

Email Address _____ Work Phone _____

Social Security # _____ Cell Phone _____
For 1099 reporting (not applicable for Canada)

Male Female / Single Married Birth date _____

PERSPECTIVES ALUMNI INFORMATION

Eligibility Requirement: Completion of *Perspectives on the World Christian Movement* at certificate or credit level with a minimum grade of 75%.

When (semester & year) and where (city & state) did you take *Perspectives*? _____

What level (check one): Graduate Undergraduate Certificate Enrichment

PERSONAL & PROFESSIONAL REFERENCES

Return this application and the 2 references in sealed envelopes, to the *Perspectives contact person where you'll be attending*.

List a pastor & co-worker who know you and can objectively evaluate your character, life and ministry.

1. _____ (_____) _____
Pastor Work phone

Address City State Zip

2. _____ (_____) _____
Co-worker Work phone

Address City State Zip

EXPERIENCE

Ministry and Work experience (current or most recent first). _____
Occupation

Organization Dates Position and Responsibilities

EDUCATION

Highest level completed: _____

6. **Communication:** In order to service students, coordinators, supervisors, and the national office, the *Perspectives* Study Program has firm target dates for submission of materials. Are you willing to work with *Perspectives'* guidelines regarding communication with your supervisor as outlined by the Annual Calendar listed below? If no, please explain.

Yes No _____

Spring Class Calendar

Sept	15	Last date to submit 5 Pillars & Brochures for Spring classes
Feb	28	Last date to submit Spring Trinity Registrations & Payments
July	1	Last date to submit Spring class close-outs

Fall Class Calendar

May	15	Last date to submit 5 Pillars & Brochures for Fall classes
Oct	15	Last date to submit Fall Trinity Registrations & Payments
Feb	1	Last date to submit Fall class close-outs

7. **Use of Name:** The growing number of materials derived from *Perspectives* is exciting! However, using the name "*Perspectives*" for Bible studies and courses that are not run through the *Perspectives* Study Program can create confusion. *Perspectives on the World Christian Movement* is based on a set of core ideas and its message and program are also known and identified by the names "*Perspectives* Study Program" or simply "*Perspectives*," therefore we ask that these names only be used if it is in reference to a class that is offered in conjunction with the *Perspectives* Study Program. Are you willing to abide by this guideline? If no, please explain.

Yes No _____

DOCTRINAL STATEMENT

We use the 1974 LAUSANNE COVENANT (attached) as our statement of faith. If you are in agreement with the *Lausanne Covenant*, the statement of mission, and intent that the *Perspectives* Study Program has adopted, please sign below.

Signature: _____ Date: _____

- Get in touch with your workshop contact to let them know you are interested. It is best if you submit this application at least 2 weeks prior to the workshop
- Registration fee must be sent in with the application
- Call or email the contact for the workshop you are attending (contact information can be found at www.perspectives.org/pcw) regarding:
 - Their mailing address
 - Payment and location information
 - Housing, food, and travel arrangements
 - Other details of your workshop
- Be certain to give your workshop's mailing address to your references on their form and the stamped envelope you give them.
- Send this form directly to your workshop contact.