



YWAM HEREDIA, COSTA RICA University of The Nations (U of N) STUDENT APPLICATION



Date of Application (mm/dd/yyyy):

I would like to apply to:

- DTS Classic-Apr
- DTS Classic-Sept
- EARS-Jan
- SLMD-Sept

- IMPORTANT -

Include a recent
photograph of yourself.

Starting date first choice (mm/dd/yyyy):

Starting date second choice (mm/dd/yyyy):

Are you pursuing a U of N Degree? Yes No

PERSONAL INFORMATION

Last name: First name: Middle name:

Nickname: Sex: Male Female Age:

Birthdate (mm/dd/yyyy): Birthplace:

Current Mailing Address

Street/Box:
City/Town: State: Zip: Country:

Permanent Mailing Address

Street/Box:
City/Town: State: Zip: Country:

Contact Information

Home Telephone: Cell Phone: Fax:

Email Address:



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PASSPORT/VISA INFORMATION

I have a valid passport/visa: Yes No

I applied for a passport/visa on (mm/dd/yyyy):

Country / Countries of Citizenship:

Name as listed on valid passport/visa:

City and country where passport was issued:

Passport/Visa number:

Expiration date (mm/dd/yyyy):

Visa type:

Date issued (mm/dd/yyyy):

City and country where visa was issued:

Visa expiration date (mm/dd/yyyy):

Have you ever been denied a passport or visa? Yes No

If yes, please provide the country and details:

FAMILY INFORMATION

Marital Status:

Single

Engaged (mm/dd/yyyy):

Married (mm/dd/yyyy):

Separated (mm/dd/yyyy):

Divorced (mm/dd/yyyy):

Remarried (mm/dd/yyyy):

Widowed (mm/dd/yyyy):



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FAMILY INFORMATION (cont.)

Spouse Last name: _____ Spouse First name: _____ Spouse Middle name: _____

Sex: Male Female Birthdate (mm/dd/yyyy): _____ Age: _____

Spouse Birthplace: _____

Will your spouse be accompanying you? Yes No

Dependent Children (Please list only those coming with you.)

Last name: _____ First name: _____ Middle name: _____

Sex: Male Female Birthdate (mm/dd/yyyy): _____ Age: _____

Nationality: _____ Passport#: _____ Exp. Date: _____

Last name: _____ First name: _____ Middle name: _____

Sex: Male Female Birthdate (mm/dd/yyyy): _____ Age: _____

Nationality: _____ Passport#: _____ Exp. Date: _____

Last name: _____ First name: _____ Middle name: _____

Sex: Male Female Birthdate (mm/dd/yyyy): _____ Age: _____

Nationality: _____ Passport#: _____ Exp. Date: _____

Child Care

Will you be bringing a child care person to care for your children while you are attending school? No Yes

Last name: _____ First name: _____ Middle name: _____

Sex: Male Female Birthdate (mm/dd/yyyy): _____ Age: _____

Nationality: _____ Passport#: _____ Exp. Date: _____



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CRIMINAL RECORD

Have you ever been convicted of a misdemeanor? Yes No

If yes, when and where? Please include detailed explanation:

Have you ever been convicted of a felony? Yes No

If yes, when and where? Please include detailed explanation:

Have you ever been convicted of a sex crime of any type? Yes No

If yes, when and where? Please include detailed explanation:

If yes to either of the preceding questions, may we check into your background? Yes No

Have you ever been convicted, imprisoned or placed on probation or parole? Yes No

Please explain the circumstances surrounding your conviction, imprisonment, probation or parole:



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EXPECTATIONS

How did you first hear of the University of the Nations?

What reason most influenced your decision to apply?

What expectations do you have for this course?

CHURCH INFORMATION

Home Church:

Pastor:

Denomination:

Street/Box:

Telephone:

Fax:

City / Town:

Country:

Email:

State:

Zip:

Youth With A Mission (YWAM) Heredia, Costa Rica
Tel: +506 2267-7063 / Fax: +506 2267-7063
Student@YWAMHeredia.com
www.YWAMHeredia.com



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WORK EXPERIENCE

If you are applying for a secondary school (not DTS), have you ever been on YWAM staff? No Yes

If yes, please indicate below. For those applying for any school, including DTS, please also include any significant non-YWAM jobs.

Position: _____ Company/YWAM Location: _____

Dates (mm/dd/yyyy): _____ to _____ Supervisor/YWAM Leader: _____

Skills used: _____

Position: _____ Company/YWAM Location: _____

Dates (mm/dd/yyyy): _____ to _____ Supervisor/YWAM Leader: _____

Skills used: _____

Position: _____ Company/YWAM Location: _____

Dates (mm/dd/yyyy): _____ to _____ Supervisor/YWAM Leader: _____

Skills used: _____

Position: _____ Company/YWAM Location: _____

Dates (mm/dd/yyyy): _____ to _____ Supervisor/YWAM Leader: _____

Skills used: _____

Position: _____ Company/YWAM Location: _____

Dates (mm/dd/yyyy): _____ to _____ Supervisor/YWAM Leader: _____

Skills used: _____



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EDUCATIONAL EXPERIENCE

If you intend to pursue a U of N degree, transcript(s) of your record(s) at each High School/Secondary School or College/University Seminary you have attended must be submitted to the U of N Registrar by the institution.

Please include Secondary/High School/Equivalent below in addition to further education, including YWAM schools if you are applying for a secondary YWAM school.

Grades completed:	Grade School	2nd/High School	Equivalent 2nd/High School
	College/University	Post Graduate	Seminary

Institution:

Degree/Major:

Dates (mm/dd/yyyy):

to

Date graduated:

Address:

Institution:

Degree/Major:

Dates (mm/dd/yyyy):

to

Date graduated:

Address:

Institution:

Degree/Major:

Dates (mm/dd/yyyy):

to

Date graduated:

Address:

Occupational / Vocational Skills including number of years experience:

Musical or other talents including number of years experience:

Musical instruments you play:



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YWAM / UNIVERSITY OF THE NATIONS BACKGROUND

If you are applying for a secondary YWAM school, please arrange for your most recent YWAM school leader to send a Reference Form to YWAM Heredia.

Have you previously attended a YWAM or U of N school? Yes No

School: _____ Lecture phase dates: _____ to _____

Location: _____

Field assignment phase dates: _____ to _____

Field assignment locations: _____

School: _____ Lecture phase dates: _____ to _____

Location: _____

Field assignment phase dates: _____ to _____

Field assignment locations: _____

School: _____ Lecture phase dates: _____ to _____

Location: _____

Field assignment phase dates: _____ to _____

Field assignment locations: _____

School: _____ Lecture phase dates: _____ to _____

Location: _____

Field assignment phase dates: _____ to _____

Field assignment locations: _____



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REFERENCES

Please indicate the contact information for whom you are giving your reference forms.

YOU MUST DOWNLOAD THE REFERENCE FORMS TO GIVE TO YOU REFERENCES FOR COMPLETION!

1. Pastor:

Telephone:

Email:

2. Employer, Teacher or Most Recent Ministry Location Leader (which?):

Telephone:

Email:

3. Friend:

Telephone:

Email:

4. Other:

Telephone:

Email:
