



Dear Applicant,

Thank you for your interest in the YWAM Tampa Discipleship Training School (DTS). We have been training pastors, missionary candidates, musicians and Christian performers for over thirty years.

The school is divided into 2 phases: The lecture phase and the outreach. The 12-week lecture phase will include all of your tuition, housing and food. You will be involved in worship and intercession and receive teaching from seasoned missionaries and teachers on subjects like Hearing the Voice of God, Guidance, Spiritual Warfare, Intercession, Cross-Cultural Evangelism, Character of God and Father Heart of God.

Our outreach will be 8 weeks long. The outreach is an exciting time of using the gifts and talents God has given you to reach out to a hurting and lost world. We will be ministering in a wide variety of venues: villages, schools, orphanages, churches and university campuses.

The application-form is 9 pages (includes this cover letter). You will also need to complete the health forms. Please give the 3 reference forms to friends and pastors. Those should be mailed directly to us.

Upon completion of your DTS, you will receive 20 college credits through the University of the Nations (U of N). DTS graduates are eligible to apply for staff positions in YWAM International, YWAM Tampa Bay or attend other U of N courses.

We look forward to hearing from you!

In His amazing grace,  
Art & Ellen Sanborn  
YWAM Tampa Bay Directors



## GUIDE TO COMPLETING THE DTS APPLICATION

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Thank you for applying to University of the Nations! May you know the Lord's grace as you seek His direction in order for us to process your application, we must receive all the following completed forms. If a question does not apply to you, write N/A in the blank. Husbands and wives enrolling as students must complete separate applications.

- ☐ **1. Checklist:** Don't forget to include a photograph.
- ☐ **2. Application Form (P.001).** This form must be filled out for any initial course you wish to apply for U of N Tampa. Note/: All dates are requested in an international format: day, month, year. (4pgs)
- ☐ **3. Application Fee: A nonrefundable Application Fee of \$20US for an individual and \$30US for a couple is to be forwarded with the application. Your application cannot be processed without it.**
- ☐ **4. Reference Form (P.002).** After you sign and enter your course and date, give one form to your pastor, one to a parent (or friend) and a third to a friend. Ask them to complete the form and mail it directly to YWAM Tampa. Please list their names and addresses on the application checklist. We must receive all three references BEFORE we can process your application. (3 references)
- ☐ **5. Health Form (P.003).** Please complete this form and return it directly to YWAM Tampa. These forms must also be submitted for your children. (4pgs)  
**TUBERCULOSIS (TB) CLEARANCE.** YWAM Tampa requires that all students and children must be tested for TB, to show evidence of a negative skin test or clear chest X-ray. Please fill in this information on the P.003 or on a separate report. Documentation must clearly indicate the test performed, the results, and the examination facility where the test was performed.
- ☐ **6. IF YOU INTEND TO ENROLL IN A U OF N DEGREE PROGRAM, WE NEED THE FOLLOWING:**
  - a. **Transcripts.** You must request that a transcript of your High/Secondary School and/or College/ University/ Seminary record to be sent to U of N. (A transcript or letter of good standing is required even if no credits were earned.)
  - b. **Proficiency/Aptitude Test for International Students** from countries where English is NOT the native language. TOEFL (Test of English as a Foreign Language) or equivalent. Scores obtained in aptitude or language proficiency tests must be submitted with your application.

**IMPORTANT:** All students are encouraged to apply early, and generally no later than two weeks prior to the start of school for U.S. students; and, for non-U.S. citizens, three weeks prior to the start of school. Enrollment in some courses is full many months in advance.

- **You must obtain or apply for a passport BEFORE COMING!**

Please direct all forms to: **YWAM Tampa Bay**  
**34077 Eiler Blvd.,**  
**Webster, FL 33597**  
**Or to our email address:**  
**E-mail : ywamtampabay@gmail.com**



**PLEASE INCLUDE THIS PAGE WITH YOUR COMPLETED APPLICATION CHECKLIST:**

**YES, I have enclosed the following...**

\_\_\_\_ Recent passport size photograph of myself (*may be used for display so make sure you like this picture*)

\_\_\_\_ Application Fee (\$20 single/ \$30 couple)

\_\_\_\_ Student Application Form

\_\_\_\_ Health Form

#### **REFERENCES**

*\* Please send out all reference forms to the appropriate persons immediately as we cannot process your application until we receive them. These forms are confidential!*

Names & Addresses of those you sent your reference forms to:

*PASTOR / CHRISTIAN LEADER*

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CHURCH NAME: \_\_\_\_\_

*FRIEND / PARENT / YWAM SCHOOL LEADER*

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

*FRIEND / PARENT / YWAM SCHOOL LEADER*

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PLEASE SEND ALL ABOVE INFORMATION TO:**

**ywamtampabay@gmail.com or mail to:**

*Attn: Registrar  
YWAM Tampa Bay  
34077 Eiler Blvd.  
Webster, FL 33597*



## Application Form

School applying for: Performing Arts Discipleship Training School ( PA DTS)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Sex: (please circle one) Male Female

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ or Mobile phone: \_\_\_\_\_

Date of application: \_\_\_\_\_

Ethnic background: \_\_\_\_\_

Marital status: (Please circle one) Single Engaged Married Divorced Separated Widowed

Languages spoken: \_\_\_\_\_

\_\_\_\_\_

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### PASSPORT INFORMATION

*You must obtain or apply for a passport BEFORE COMING!*

Your passport must have a minimum at least 6 months  
remaining before the expiration date.

Name as listed on passport: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Place where passport was issued: \_\_\_\_\_

Passport expiration date: \_\_\_\_\_



### MINISTRY QUESTIONS

(You can attach a separate piece of paper if this isn't enough space.)

1) Do you have a call to full time missions or church work?

☐ Yes

☐ No

Please describe your conversion experience and present relationship with the Lord.

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2) How would you describe your relationship with your family?

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3) How does your family feel about your plans to attend this DTS?

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4) What church do you attend? \_\_\_\_\_



5) In what ways do you serve you church? (example: lead worship, teach Sunday School)

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6) Do you hope to use the Performing Arts in full time Christian ministry?

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7) Check all the areas that you believe you have a fairly good level of skill:

<input type="checkbox"/> Directing	<input type="checkbox"/> Makeup
<input type="checkbox"/> Acting	<input type="checkbox"/> Set Design or Building
<input type="checkbox"/> Stage Management	<input type="checkbox"/> Scriptwriting
<input type="checkbox"/> Choreography	<input type="checkbox"/> Composing
<input type="checkbox"/> Costumes	<input type="checkbox"/> Song writing
<input type="checkbox"/> <b>Dancing:</b>	<input type="checkbox"/> Jazz
<input type="checkbox"/> Tap	<input type="checkbox"/> Ballet
<input type="checkbox"/> Worship	<input type="checkbox"/> Acro
<input type="checkbox"/> <b>Singing:</b>	<input type="checkbox"/> Worship
<input type="checkbox"/> Musical Theater	<input type="checkbox"/> Other _____
<input type="checkbox"/> Musical Instruments: _____	

8) Which of the areas mentioned above do you have training in?

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- 9) What other areas of ministry do you feel you have giftings in? (i.e teaching)

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- 10) What do you hope to learn and achieve while attending this course?

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- 7) What are some of your hopes and dreams? Your reply can be just a few paragraphs below or attach a separate page.

[illegible]

**IN CASE OF EMERGENCY CONTACT:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Your Emergency information:**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Blood type: \_\_\_\_\_

Allergies to drugs (please list) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONSENT FOR TREATMENT:**

In case of emergency, I give my consent for medical attention and treatment, including anesthesia and surgery, as the attending physician deems necessary.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_





### **FINANCIAL INFORMATION:**

Will you have your complete school tuition at the time of enrollment? \_\_\_\_\_

If not, from what source will it come? \_\_\_\_\_

\_\_\_\_\_

### **ACKNOWLEDGEMENT OF FINANCIAL RESPONSIBILITY**

I understand that payment of tuition fees for the lecture phase must be made on or before the first day of class unless otherwise approved by the school leader before my departure for Florida. If I am accepted by YWAM Tampa and the University of the Nations, I promise to abide by the spirit, rules and schedule of the school.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **RELEASE OF LIABILITY**

I hereby release University of the Nations and Youth With A Mission, Inc., it's staff, and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please send your application to : **YWAM Tampa Bay School Registrar**  
**34077 Eiler Blvd.**  
**Webster, FL 33597**

Or send it as an attachment via E-mail to: [ywamtampabay@gmail.com](mailto:ywamtampabay@gmail.com)