

EXECUTIVE PROGRAMME Registration Form

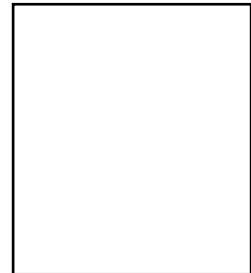
Date of submission: [] Application Deadline: **31 Dec, 2019/1 Jun, 2020**
 Program applying for: [] **Breakthrough Programme (12 – 25 March 2020)**
 [] **Immersion Programme (13 Aug – 9 Sept 2020)**

Please note that the programme will be conducted fully in English and all materials will be provided by IDMC Institute.

The Candidate is requested to provide a clear and definite answer to every question. Complete information is necessary for processing each application.

The Candidate is requested:

1. to supply a copy of a recent photograph (preferably passport-sized) ➡
2. to give a brief resume of your life, Christian experience (conversion, baptism, Christian ministry, etc.)
3. to make and pay for their own arrangements for airfare, food, lodgings (CEFC can recommend and make reservations at hostels if necessary)
4. to make all necessary visa arrangements, if applicable (a letter of invitation from IDMC Institute can be provided upon request)



I. PERSONAL INFORMATION

Full Name (Rev/Dr/Pastor/Mr/Mdm/Miss): _____
(As appears in your passport. Please underline your FAMILY NAME / SURNAME / LAST NAME)

Preferred Name: _____ Gender: _____
(What would you like to be printed on your name-tag throughout the programme?)

Date of Birth: _____ Age: _____ Mobile: _____

Email Address: _____ Country: _____

Marital Status: _____ No. of Children: _____

Occupation: _____

Passport Number: _____ Passport Expiry Date: _____

Highest Level of Education: _____

Language/Dialects of proficiency: _____

Medical history/illnesses _____
*(Any medical conditions/illnesses that we need to know about?) *Please bring your own medication*

Dietary requirements _____
Please specify if you have any dietary requirements (e.g. vegetarian, non-meat eater, food allergies, etc)

Emergency Contact Details

Name: _____

Email: _____

Mobile: _____ Relationship: _____

II. CHURCH AFFILIATION AND CHRISTIAN MINISTRY

Name of church: _____

Name of Senior Pastor: _____ Country: _____

Current appointment: _____

Years in ministry: _____ Type of appointment: _____
(Total years in active service, full-time and lay) *(Full-time / part-time / lay capacity)*

III. CHRISTIAN MINISTRY EXPOSURE AND EXPERIENCE

1. Is this your first visit to Singapore?	Yes / No	Remarks:
2. Do you have any prior exposure with Covenant EFC? In which areas or aspects?	Yes / No	Remarks:
3. How did you come to hear about the Executive Programme?		Remarks:
4. What is the nature of your ministry in your church?		Remarks:
5. What kind of ministry would you be keen to observe, participate and learn?		Remarks:
6. Share briefly how your church is moving, growing and becoming an intentional disciple-making church.		Remarks:

IV. FURTHER INFORMATION ON PERSONAL MATTERS

7. Do you observe personal silence and solitude regularly? If so, how often?	Yes / No	<i>Remarks:</i>
8. Please share briefly how God normally speaks to you.		<i>Remarks:</i>
9. Are you being mentored? Who is he/she and how long have you been mentored?	Yes / No	<i>Remarks:</i>
10. Are you mentoring someone in discipleship or leadership? Who are you mentoring and how often do you meet?	Yes / No	<i>Remarks:</i>
11. What do you do in your free time (sports, hobby or recreation)? <i>Please share maximum three activities.</i>		<i>Remarks:</i>

V. PERSONAL TESTIMONY

(You may choose to attach a separate document for this section)

1. Please give a brief resume of your life and Christian experience:

Year	Christian Experience	Remarks
<i>(e.g. 2010)</i>	<i>(Conversion)</i>	<i>(Accepted Christ at evangelistic rally)</i>

2. Please recount KEY MILESTONES of your journey with Christ, starting with a short testimony of your conversion experience, and then include your journey in joining the Executive Programme.

VI. PREPARATORY READING

Edmund Chan, *A Certain Kind: Intentional disciple-making that redefines success in ministry*, 2013

VII. DECLARATION

Please have your Senior Pastor (or church leader equivalent) to endorse your application:

(If you are the Senior Pastor, please get your church board chairman to endorse.)

Name of Leader: _____ Signature: _____

Comments: _____

I certify that all the above items of information are correct.

In filling in this form, you are giving your consent to IDMC Institute to keep and use your data for the purposes of **IDMCi Executive Program** and to contact you with updates or information relating to **IDMCi Related Programs** as specified in our Data Privacy Policy. Please be assured that your personal information provided will be kept secure.”

Signature: _____

Name: _____

Date: _____