

## INFORMATION

**YEAR OF TRAINING | CREATIVE ARTS ACADEMY |  
SATURATION SCHOOL OF MISSIONS | SCHOOL OF THE WORD |  
YOUNG ENTREPRENEURS BUSINESS SCHOOL**



### HOW TO COMPLETE THIS APPLICATION

Thank you for your interest in Jubilee Training Centre! The application form has been designed to assist you, your church, and us at Jubilee Training Centre to prayerfully evaluate whether the school you are applying for is right for you at this time. Please answer all of the questions on this application form unless otherwise instructed. It will help us if you print your answers clearly using a black or blue pen. Husbands and wives enrolling as students must complete separate application forms. If you need more space to answer a question, please use a separate piece of paper. **Please note the information requested on this form is restricted to details relevant to our consideration of your application at this stage.**

#### SECTION A – PERSONAL INFORMATION [PAGE 4]

Please indicate which course you are applying for (i.e. Year of Training, Creative Arts Academy, Saturation School of Missions or School of the Word or Young Entrepreneurs Business School) and complete this section in full.

#### SECTION B – IDENTITY & EMIGRATION INFORMATION [PAGE 10]

Please complete this section as instructed. The information is needed for anticipated visa purposes only, including any international trips. If you have any queries regarding VISA applications for the UK please contact the UK Home Office directly ([www.ukba.homeoffice.gov.uk](http://www.ukba.homeoffice.gov.uk)). We will need copies of your passport before we can accept you onto any course, as this is required by UK Border Agency for the prevention of illegal working.

#### SECTION C – CONFIDENTIAL REFERENCES [PAGES 11 AND 16-21]

Enclosed with this application are 2 confidential Reference Forms:

- your **church leader**
- a **mature Christian friend**

Fill in the 'Candidate Details' section with your name and address and give the forms to your two preferred referees. Please ask that they return the forms **directly to Jubilee Training Centre** as soon as possible as we are not able to process your application until we have received these. Please note that we do NOT need additional references if you are applying for your second Training Centre course.

#### SECTION D – LIABILITY, CONSENT, COMMITMENT & TERMINATION OF INVOLVEMENT [PAGE 12]

Please read this section carefully and sign where indicated.

#### SECTION E & F – MEDICAL REPORT [PAGE 13]

A Medical Report is included – *Section E* is to be completed by you. *Section F* is to be completed by your doctor if you have on-going medical condition(s) that may hinder your involvement in parts of the course which require strenuous physical activity

#### ADMINISTRATION FEE AND PROCESS

A non refundable fee of £100, which covers the cost of processing your application, should be included when you return this form (please see the Financial Policy for more information).

#### Please return the application form to:

The Administrator, Jubilee Training Centre, 9 Ashford Road, Maidstone ME14 5BJ, United Kingdom

To ensure we receive your application form we suggest that prior to posting it, you email us a scanned version of it; or send us an email confirming that you are applying for a course. If you have not heard from us within 3 weeks of posting your application, please contact us to ensure we have received it. Our preferred method of communication is via email ([study@jubileetc.org.uk](mailto:study@jubileetc.org.uk)).



9 Ashford Road Maidstone Kent ME14 5BJ United Kingdom t: +44 (0)1622 677 115 e: [study@jubileetc.org.uk](mailto:study@jubileetc.org.uk) [www.jubileetc.org.uk](http://www.jubileetc.org.uk)

Year of Training, Saturation School of Missions, Creative Arts Academy, Young Entrepreneurs Business School and School of the Word operate under the umbrella of Church of the Nations Maidstone Training Centre T.A. Jubilee Training Centre • Registered Charity No. for England and Wales: 1090619

# FINANCIAL POLICY

The Financial Policy explains the financial costs of studying at Jubilee Training Centre and how the fees are allocated. Please note that the policy is divided into two sections: residential schools and non-residential schools. The 'administration' fee is to be paid with submission of your application form; whilst tuition and accommodation fees are payable upon commencement of the course. Although all our courses have the same fee structure for the year, there might be school specific additional costs. This will be communicated to the students by our school leaders.

## **PAYMENT:**

All fees are payable in Pounds Sterling only. We will send you the banking details on acceptance on the course as they are different for each school.

## **BURSARIES / SPONSORSHIP:**

Jubilee Training Centre is not offering bursaries at present. On provisional acceptance of a student, a Sponsorship form can be obtained on request from [study@jubileetc.org.uk](mailto:study@jubileetc.org.uk). This will assist you as an individual to raise your own sponsors from friends and family.

## **ADMINISTRATION FEE AND DEPOSIT - FOR ALL STUDENTS**

A non-refundable administration fee of £150 (which covers the cost of processing your application and team clothing) should be paid once you apply online. Please send proof of payment.

## **STANDARD FEE STRUCTURE – APPLICABLE TO ALL STUDENTS**

### **TUITION:**

#### **TUITION FEES COVER:**

- Books and resources
- Orientation
- Running of the administration office
- Lecture costs
- Travel costs – outreach/mission events that take place within the UK

#### **WHAT THE FEE DOES NOT INCLUDE:**

- Medical expenses
- Personal items & toiletries
- Visa expenses
- Personal phone and mobile phone calls
- Personal insurance on valuables eg. Laptops, mobile phones etc.
- Optional international mission trips arranged through Jubilee Church
- Optional conferences and training arranged through Jubilee Church, however these are normally subsidised for students.
- Note: There may be additional fundraising done during the duration of the year to cover shortfalls. This fundraising will be done as a team and money raised will contribute to outreaches.

## **ACCOMMODATION: (YEAR OF TRAINING AND CREATIVE ARTS ACADEMY STUDENTS ONLY)**

#### **ACCOMMODATION FEES COVER:**

- All meals (except during holiday breaks)
- Accommodation
- Travel costs – to and from lectures and for any JTC organised activities or outreach/mission events that take place within the UK or internationally
- Personal – Laundry facilities & Internet
- General upkeep of the residential properties and vehicles
- CD/DVD production (CAA students only)

We will assess availability of accommodation for students who are not in a residential course each year and give the prospective students options of either; residential accommodation, student shared accommodation or with host families within Jubilee Church.

## 1. APPLICATION ADMINISTRATION AND ACCEPTANCE COSTS

Payment	Due Date	Amount
Application Fee	Payable upon return of this form	£150

## 2. FEES FOR THE YEAR – PAYMENT OPTIONS

Tuition Fees are payable upfront at the start of the course

Option	Due Date	Amount	TOTAL for Year
PAYMENT	01 September	£3000.00	£3000.00

### Accommodation costs

Option	Due Date	Amount	TOTAL for Year
1 PAYMENT	01 September	£4000.00	£4000.00
3 PAYMENTS	01 Sep, 1 Jan, 1 May	£1400.00 x 3	£4200.00
10 PAYMENTS	01 Sep, and then 1st of every month	£440.00 x 10	£4400.00

## 3. ADDITIONAL COSTS BY THIRD PARTIES:

**SATS Fees** (Theological degree) is payable upfront at the start of the course for first year students and each semester for 2nd and 3rd year students. This fee will change according to the Pound Sterling exchange rates. This is not strictly compulsory but highly recommended especially for those who have not studied beyond school level. Please see [www.jubileetc.org.uk/information/sats-information](http://www.jubileetc.org.uk/information/sats-information) for further info.

Option	Due Date	Amount	TOTAL for Year
PAYMENT	01 September	£700 - £1000.00	£700 - £1000.00

### Open University (Young Entrepreneurs Business School)

During the year the students will be completing an Open University Certificate in Business Studies (C63) which can count towards a BA(Hons) in Business Studies. Fees are payable directly to Open University and government funding can be applied for individually. Typical cost £2500.00

### Israel trip (School of the Word)

Also optional, we have a very unique tour visiting some of the "off the beaten track" sights which brings what the students have learnt in the classroom to life. Typical cost £1400.00

### Long Term mission trips (Saturation School of Missions)

**Mission trips for up to 6 Months in South Africa and Ukraine.** Mission accommodation and outreaches are covered personally but team fundraising is relied upon heavily to meet this target. Typical costs £1000 to £2500

## SPECIAL CIRCUMSTANCES

Jubilee Training Centre is a faith-based organisation and therefore, for residential and non-residential schools alike, we are open to prayerfully consider applications from those who, due to various circumstances, are lacking the total finances. If, together with their church, we felt it right that they attend one of the schools, we would agree upon a financial scheme on an individual basis. Without such an arrangement in place prior to the school starting, we are unable to accommodate students who do not have the required fees available. Please do not hesitate to contact us should this apply to you.

## PAYMENT

**All fees are payable in POUND STERLING only.** Fees can be paid by **cheque**, however **direct bank transfer** is preferred. International students can pay with PayPal via our website. The banking details for the schools are as follows:

- (1) Year of Training  
**Direct bank transfers** are to be made to COTN Training Centre, HSBC Bank, Sort Code 40-31-06, Account No. 82502070  
**Cheques** are payable to COTN Training Centre
- (2) Creative Arts Academy  
**Direct bank transfers** are to be made to Creative Arts Academy, HSBC Bank, Sort Code 40-17-05, Account No. 61854194  
**Cheques** are payable to Creative Arts Academy
- (3) Saturation School of Missions  
**Direct bank transfers** are to be made to COTN Training Centre, HSBC Bank, Sort Code 40-31-06, Account No. 21840177  
**Cheques** are payable to COTN Training Centre
- (4) School of the Word  
**Direct bank transfers** are to be made to School of the Word, HSBC Bank, Sort Code 40-17-05, Account No. 41883909  
**Cheques** are payable to School of the Word
- (5) Young Entrepreneurs Business School  
**Direct bank transfers** are to be made to Young Entrepreneurs Business School, HSBC Bank, Sort Code 40-31-06, Account No. 82530899  
**Cheques** are payable to Young Entrepreneurs Business School

For international payments, please email us for IBAN numbers and further Bank details.

\* If you do not have a UK bank account, we can provide you with the relevant documentation to assist you in opening an account with one of our preferred banks, once you are resident in the UK.

**HELP:** Please contact the Training Centre office should you have any questions or queries.

## TO AID YOUR COMPLETION OF THIS FORM

Please tick the boxes after you have completed each task:-

- Read and understood the Financial Policy sheet
- Read and understood the Policies and Procedures
- Completed and signed the Application Form
- Entered the required details on 2 of the Reference Forms and sent them to your referees
- Completed the Medical Report – including the section to be completed by a doctor if needed
- Attached a copy of passport and visa (if applicable) or another form of identification
- Signed the Indemnity Form along with 2 witnesses
- Enclosed a Police Clearance Certificate issued in country of residence (for international students)
- Attached 2 ID photos to the Application Form (1 photo will be used for your student card)
- Enclosed a copy of the highest qualification received
- Enclosed £100 Administration Fee

PLEASE AFFIX  
2 ID PHOTOS HERE

[1 photo will be used  
for your student card]

## APPLICATION FORM

**YEAR OF TRAINING**  
**CREATIVE ARTS ACADEMY**  
**SATURATION SCHOOL OF MISSIONS**  
**SCHOOL OF THE WORD**  
**YOUNG ENTREPRENEURS BUSINESS SCHOOL**



JUBILEE TRAINING CENTRE

[Confidential when completed]

For Office Use Only

BOOKLET	ACKNOWLEDGE LETTER	ACCEPTANCE LETTER	HANDOVER COMPLETE

ADMIN FEE	PHOTOS	VISA REQUIRED	COUNTRY OF RES	CONF. REF. 1	CONF. REF. 2	MEDICAL REPORT	COPY OF PASSPORT	STUDENT NUMBER

### SECTION A – PERSONAL INFORMATION

#### COURSE

Please tick which course you are applying for:

<input type="checkbox"/>	Year of Training	<input type="checkbox"/>	Saturation School of Missions
<input type="checkbox"/>	Creative Arts Academy	<input type="checkbox"/>	School of the Word
<input type="checkbox"/>	Young Entrepreneurs Business School		
Course Start Date (MM/YY)		__ / 20 __	

#### PERSONAL INFORMATION

Title (Mr/Mrs/Miss/etc.)		Surname	
First Name(s)			
Preferred Name			
Maiden Name / Previous Surname (if applicable)			
Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Date of Birth (DD/MM/YY)		Age (at start of course)	
Place of Birth (country and town)			
Residential Address			
		Post Code	
Correspondence Address  (if different from above)			
		Post Code	
Home Tel. No.		Mobile No.	
Email Address			
Preferred Method of Communication	Email <input type="checkbox"/>	Letter <input type="checkbox"/>	Phone <input type="checkbox"/>

T-shirt size	Small		Medium		Large		X-Large		Other	
<b>NEXT OF KIN</b>										
In case of an emergency, whom should we contact?										
Name & Surname										
Relationship to you										
Home Tel. No.					Mobile No.					
Address										
								Post Code		

<b>LANGUAGES</b>										
Home Language										
Are you confident in your ability to communicate in English?							Yes		No	
Other Languages – please indicate whether the language is spoken and/or written										
<i>Please note that you are required to communicate (spoken &amp; written) proficiently in English prior to attending one of Jubilee Training Centre's courses.</i>										

<b>MARITAL STATUS</b>										
Single		Engaged			Married					
Separated		Divorced			Widow/er					
Spouse / Fiancé's Name (if applicable)										
Has your Spouse / Fiancé Applied for this course					Yes		No			
If NOT, please comment on their plans during your enrolment at the Jubilee Training Centre										

<b>DEPENDANTS</b>										
No. of Children (if applicable)										
Will any of your children be accompanying you?					Yes		No			
If YES, please give their details below:										
Name		Date of Birth			Gender					
1.										
2.										
3.										
4.										

**EDUCATION AND SKILLS (PLEASE USE A SEPARATE PIECE OF PAPER IF NECESSARY)**

**Secondary Education** –between 11 and 18 years

Name of Institution	Dates Attended	Qualification(s) Received

**Further Education** – post 18 years

Name of Institution	Dates Attended	Qualification(s) Received

List of any other training or qualifications you have received


Please enclose a copy of your highest qualification received.

Copy Enclosed

**HISTORY**

Main Activity Currently?

School		College / University		Employed		Unemployed	
Other – please specify							

**Employment History** (if applicable)

Employer	Job Title	Job Description	Full / Part time	Dates

<b>TALENTS &amp; HOBBIES</b>			
Do you play a musical instrument?		Yes	No
If yes, which one(s)	1.	Proficiency	
	2.	Proficiency	
	3.	Proficiency	
	4.	Proficiency	
Hobbies			
Feel free to describe some achievements you feel are highlights over your lifetime so far:			
<i>If you are applying for Creative Arts Academy you will be required to supply further information on your music / dance proficiency levels along with a sound / video recording (we will send you more information regarding this once receiving your application).</i>			

<b>CHURCH INFORMATION</b>			
Which church / fellowship are you submitted to?			
Leader's Name		Surname	
Leader's Title			
Address			Post Code
Email			
Phone	Home / Mobile		Work
Does your Church Leader support the idea of you attending Jubilee Training Centre?			
Yes		Yes, with reservations	No
May we contact this leader?		Yes	No

<b>CHRISTIAN &amp; LIFE EXPERIENCE (PLEASE USE A SEPARATE PIECE OF PAPER IF NECESSARY)</b>
Please answer the following questions as briefly as possible:
1. How did you hear about Jubilee Training Centre?
2. What is your reason for applying for this particular course?
3. What hopes and expectations do you have for yourself during this course?



4. Describe your conversion experience or how and when God became real and personal to you.			
5. On a scale of 1-10 (1 being weak, 5 being average and 10 being excellent) please assess yourself in the following areas.			
Physical Health		Social Poise	
Spiritual Maturity		Emotional Stability	
Financial Stability			
6. Due to the team environment that you will be in, are there any concerns regarding how you relate or interact with the same or opposite gender. Please explain.			
7. What previous experiences have hindered your growth to maturity and do you feel they still affect you?			
8. What responsibility or leadership experience have you had in a local church (i.e. youth leader, etc.)?			

FINANCES			
Please read the <b>Financial Policy Sheet</b> before completing this section. Students are responsible for providing their own fees and personal living expenses. As you do the possible, God will do the impossible.			
Are you able to pay your fees for the course, in full, upfront?	Yes		No
If NOT, please answer the following questions:			
£	Is what I have at the present time towards the course fees		
£	Is what my church / family / friends / others have pledged towards my fees		
£	Is what I still need for my fees		
How do you plan to raise the amount you still need?			

<b>FINANCES (CONTINUED...)</b>			
Please list current financial obligations, if any, and how you expect to fulfil them. This includes credit cards, bank loans and any dependants you may have.			
Have you ever been declared bankrupt or incurred any Court County Judgements (i.e. black listed)?	Yes	<input type="checkbox"/>	No
If YES, please give details below:			

<b>CRIMINAL OFFENCES</b>			
Due to the extensive work that Jubilee Training Centre undertakes within the community, including working with children, an enhanced disclosure (CRB check) will be necessary. All foreign nationals are to supply a 'police clearance certificate' from their country of residence. This can be submitted at the start of the course.			
Certificate enclosed	<input type="checkbox"/>	Certificate to be submitted at start of course	<input type="checkbox"/>
Have you ever been cautioned, charged or convicted of a criminal offence in any country, or do you have any cases pending, other than minor traffic violations?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If YES, please give details			
Have you ever been the subject of a police investigation in any country which did not lead to a criminal conviction?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If YES, please give details			
Has any allegation ever been made against you which has been reported to, and investigated by, Social Services or The Social Work Department in any country?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If YES, please give details			
Has any disciplinary action ever been taken against you or written warning given to you in any country, by any employer, charity or other organisation or body working with children or young people in relation to your behaviour with children or young people?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If YES, please give details			

## SECTION B – IDENTITY & EMIGRATION INFORMATION

IDENTITY			
Country of Birth		Nationality	
Country of Residence (if different from above)			
Please enclose a copy of your passport (the expiry date should exceed the start date of your course by 18 months). Should you not have a passport it is advisable to apply for one as you may go on an international trip.			Copy enclosed

EMIGRATION CONTROL			
Please answer the following questions if you are <b>NOT</b> a UK citizen:			
Do you require a visa to study in the United Kingdom?	Yes		No
If you have ticked 'no', please enclose a copy of your visa or state why you do not need one (e.g. part of the European Union).			Copy enclosed
If you are already in the possession of a valid UK visa, please give details below:			
Type of Visa			
Date of Issue		Date of Expiry	
If you are NOT in the possession of a valid UK visa, please specify which visa you will be applying for (see below for possible options). This can be sent to us shortly before the course begins:			
Type of Visa			
Please note that we are not permitted to give you any visa advice but can only give you the information required to make your application. If you have any questions about the visa process, please visit the UK Border Agency website which will have the latest information and is extremely useful ( <a href="http://www.ukba.homeoffice.gov.uk">http://www.ukba.homeoffice.gov.uk</a> ).			
If you need a visa and are still in the process of applying for one, please complete our application first as we do not need proof of your visa until you are about to arrive in the United Kingdom. It is very important to keep us up to date with your visa progress and to inform us as soon as possible if your visa application is successful or not. If this information is not clearly communicated, you may still be liable for all fees due. We are committed to the UK Border Agency to report any persons who have been granted a visa and fail to arrive on their first day or who we may suspect of immigration abuse.			
The following 2 options are not exclusive but the most common type applied for.			
<b>TIER 5 (YOUTH MOBILITY SCHEME)</b>			
Many applicants apply for this visa. For further information please visit: <a href="http://www.ukba.homeoffice.gov.uk/visas-immigration/working/tier5/youthmobilityscheme">http://www.ukba.homeoffice.gov.uk/visas-immigration/working/tier5/youthmobilityscheme</a>			
<b>TIER 5 (CHARITY WORKER)</b>			
Due to the extreme practical nature of the courses, Jubilee Church holds a Tier 5 (Charity Worker) Sponsor Licence. All the practical training fulfils the churches Charitable Objectives in reaching and transforming the community. Please email us if you require further information on this at <a href="mailto:study@jubileetc.org.uk">study@jubileetc.org.uk</a> . Please note that you have to be accepted onto the course prior to applying for this visa as we need to give you a specific reference number.			

## SECTION C – CONFIDENTIAL REFERENCES

### CONFIDENTIAL REFERENCES

Attached are 2 Confidential Reference forms that need to be completed by your chosen Referees and returned **directly to Jubilee Training Centre** as soon as possible (for further information, please see 'Section C – References' on page 1 of this application form).

Who have you sent the Confidential Reference forms to?

#### CHURCH MINISTER OR LEADER

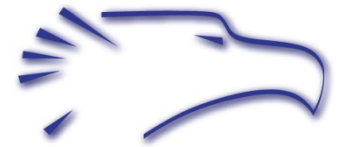
Name & Surname			
Relationship to you			
Home Tel. No.		Mobile No.	
Address			Post Code

#### MATURE CHRISTIAN FRIEND

Name & Surname			
Relationship to you			
Home Tel. No.		Mobile No.	
Address			Post Code

*Please see Confidential Reference forms on pages 16-21*

**SECTION D – LIABILITY, CONSENT,  
COMMITMENT & TERMINATION OF INVOLVEMENT**



JUBILEE TRAINING CENTRE

**LIABILITY, CONSENT, COMMITMENT & TERMINATION OF INVOLVEMENT**

**Release of Liability**  
In the absence of any negligence or other breach of duty by Jubilee Training Centre, participation in a Jubilee Training Centre programme, event or outreach is entirely at the participant's own risk. Likewise, participation in such activities is at the discretion of the participants. Participants are advised to have adequate medical insurance for all phases of their involvement with Jubilee Training Centre.

Applicant's Signature		Date	
-----------------------	--	------	--

**Consent for Treatment**  
In the event that I am unable to sign a consent form due to incapacity, I hereby give my consent for any treatment / medical intervention deemed necessary by the attending health care professionals. Whilst Jubilee Training Centre will make every effort to contact my next of kin or emergency contacts, there may be situations where this is not possible. I, therefore, give permission to Jubilee Training Centre to act in my best interests. I recognise that in an emergency situation it is standard operating procedure to always act in the interest of preserving life.

Applicant's Signature		Date	
-----------------------	--	------	--

**Commitment**

- I have completed all portions of this application truthfully and to the best of my knowledge, and if accepted by Jubilee Training Centre, I will, under God, abide by the spirit, authority and schedule of the programme.
- I understand that Jubilee Training Centre incorporates both theoretical and practical training and by completing this application I am making a commitment to both aspects of the training process.
- I confirm that I have read the **Financial Policy Sheet** and understand that payment of my course fees must be made according to the dates specified (unless prior arrangements have been made).
- I therefore undertake to pay all personal expenses during my involvement with Jubilee Training Centre.

Applicant's Signature		Date	
-----------------------	--	------	--

**Termination of Involvement**  
Jubilee Training Centre reserves the right to terminate my involvement with them if I am found to have misled Jubilee Training Centre in any way, or if my conduct is prejudicial to the good running of the course or to the reputation of Jubilee Church. I accept that I will still be financially responsible for the course fees, in full, should my involvement be terminated or I decide to leave for reasons that are not medically related or in my control. I have read this form and accept the terms set out in it.

Applicant's Signature		Date	
-----------------------	--	------	--

<b>Witness 1</b>		<b>Witness 2</b>	
Signature		Signature	
Date		Date	

## SECTION E – PERSONAL MEDICAL REPORT



### TO THE APPLICANT

*The information required will help us make sure that you will physically be able to do the course you have applied for. If we feel that your medical health would be challenged, we would recommend another course that caters for your particular needs. We have also witnessed healing in many of these areas in the past. We do cater for various special needs but need to assess requirements during the application process.*

Please complete this Section of the report yourself.

Applicant's Name			
Date of Birth (DD/MM/YY)		Age (at start of course)	
Course Applied for			

### GENERAL HEALTH

Are you physically fit and in good health (i.e. you have no on-going medical conditions which require treatment).	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
---	-----	--------------------------	----	--------------------------

If NO, please explain				
-----------------------	--	--	--	--

Are you able to walk up to 6 miles (10 kilometres) in a day?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
--	-----	--------------------------	----	--------------------------

If NO, please explain				
-----------------------	--	--	--	--

Are you able to carry out reasonably strenuous physical work/exercise?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
--	-----	--------------------------	----	--------------------------

If NO, please explain				
-----------------------	--	--	--	--

Do you have/had any disabling or limiting mental health issues?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
---	-----	--------------------------	----	--------------------------

If YES, please explain				
------------------------	--	--	--	--

*If you have been asked to explained any of the above, please take this form along to your General Practitioner or other Doctor who has recently looked after you and have him/her complete Section F.*

### MEDICAL HISTORY

Please answer the following questions as fully as possible:

List all the **SERIOUS ILLNESSES AND OPERATIONS** you have had in the past. This means:

- any illness requiring hospital admission,
- treatment from your doctor for an illness lasting more than one month,
- any illness which may affect your health, or
- any chronic illness


## MEDICAL HISTORY (CONTINUED...)

List any SERIOUS ILLNESS(ES) in your Family.

List any CURRENT MEDICAL CONDITIONS for which you are receiving treatment, or which may affect your health. Please include any ALLERGIES and severity.

List any MEDICATION(S) which you take, either on a regular basis, or only when needed.

What is your HEIGHT?

What is your WEIGHT?

Describe any mental health conditions for which you have in the past or currently receiving treatment. (e.g. anxiety, depression, panic attacks, eating disorders, other psychiatric disorders).

Is there any other information, which will be helpful for us to know as we consider your application?

## APPLICANT'S RELEASE OF MEDICAL INFORMATION

I (applicant's name)

give permission for the release of relevant medical information to the Jubilee Training Centre Medical Officer prior to training or service with the Training Centre.

Signature

Date

## SECTION F – DOCTORS MEDICAL REPORT



### To be completed by the Doctor who holds the applicant's medical records

(This form is compulsory if you have answered NO to the relevant questions in Section E and voluntarily if you are uncertain of your ability to complete the Course applied for)

*(The Doctor is entitled to charge a fee for this service for which you are responsible).*

#### MEDICAL REPORT

Name of Applicant	
-------------------	--

Would you please verify the medical history as supplied by the applicant and make any additions or comments as appropriate. The purpose of this report is to assess suitability for training in the United Kingdom. Some of the courses have very physical and mentally strenuous aspects and may involve pressurised situations. Practical field placements may involve work in primitive situations anywhere in the world. Please make any comments or additions on the following:

RELEVANT PAST MEDICAL HISTORY	

RELEVANT FAMILY MEDICAL HISTORY	

CURRENT MEDICATION	

WEIGHT and GENERAL FITNESS	

GENERAL HEALTH	

Is the applicant receiving treatment for MENTAL HEALTH ISSUES? If so please comment on severity	

Has the applicant had any ALLERGIC REACTIONS	

Is there any other RELEVANT INFORMATION which we need to know before accepting the applicant?

Doctor's Signature		Date
--------------------	--	------

Name & Address (or practice stamp)	

#### Please return this form to:

The Administrator | Jubilee Training Centre | 9 Ashford Road |  
Maidstone | Kent | ME14 5BJ | United Kingdom



## CONFIDENTIAL REFERENCE

YEAR OF TRAINING | CREATIVE ARTS ACADEMY |  
SATURATION SCHOOL OF MISSIONS | SCHOOL OF THE WORD |  
YOUNG ENTREPRENEURS BUSINESS SCHOOL



JUBILEE TRAINING CENTRE

TO BE COMPLETED BY YOUR **CHURCH MINISTER OR LEADER**

### CANDIDATE'S DETAILS (TO BE COMPLETED PREFERABLY BY THE APPLICANT)

Applicant's Name			
Telephone		Email	
Course Applied for			
Start Date			

### JUBILEE TRAINING CENTRE

Jubilee Training Centre ([www.jubileetc.org.uk](http://www.jubileetc.org.uk)) was established in 2001 and operates under Jubilee Church Maidstone ([www.jubilee.co](http://www.jubilee.co)), which is part of Church of the Nations ([www.cotn.org](http://www.cotn.org)). It consists of 5 different schools – Year of Training, Creative Arts Academy, Saturation School of Missions, School of the Word and Young Entrepreneurs Business School – each specialising in a different area.

The person named above has listed you as their Church Minister or Leader and as such we would appreciate it if you would supply the information requested on this form in order to aid us in the evaluation of the applicant. The course they are applying for will equip them both theoretically and practically, and the students will at times find themselves in potentially stressful situations, which will provide them with an opportunity to utilise their skills. **It is therefore not in the applicant's best interest to give an unrealistically positive view of them.** An honest, realistic appraisal of the challenges they will face will help rather than hinder their application.

Please return this form to **Jubilee Training Centre directly – do NOT send it via the applicant.** We will need to receive it before we can process their application. Thank you.

#### Return Address:

The Administrator, Jubilee Training Centre, 9 Ashford Road, Maidstone, Kent, ME14 5BJ, UK

### REFEREE'S DETAILS

Referee's Name								
Current Address							Post Code	
Telephone				Email				
Preferred Method of Communication		Email		Letter		Phone		
How long have you known the applicant?				Months		Years		
What is your relationship to him / her?								
Do you feel you know this applicant well enough to complete this reference?		Yes		No				

### PERSONALITY / CHARACTER PROFILE

Please tick next to the option that best describes the applicant:

Physical Condition		Intelligence	
<input type="checkbox"/>	Very poor physical condition	<input type="checkbox"/>	Learns and thinks slowly
<input type="checkbox"/>	Poor physical condition	<input type="checkbox"/>	Average mental ability
<input type="checkbox"/>	Average physical condition	<input type="checkbox"/>	Alert, has a good mind
<input type="checkbox"/>	Above average physical condition	<input type="checkbox"/>	Brilliant, exceptional

## PERSONALITY / CHARACTER PROFILE (CONTINUED...)

<b>Emotional Resilience</b> [to trying situations]		<b>Personality</b>	
<input type="checkbox"/>	Gets angry, impulsive	<input type="checkbox"/>	Avoided by others
<input type="checkbox"/>	Withdraws	<input type="checkbox"/>	Tolerated by others
<input type="checkbox"/>	Gets discouraged easily	<input type="checkbox"/>	Liked by others
<input type="checkbox"/>	Meets constructively	<input type="checkbox"/>	Well-liked by others
<b>Responsiveness</b> [to other's feelings]		<b>Leadership</b> [inspiring others; maintaining their confidence]	
<input type="checkbox"/>	Slow to sense how others feel	<input type="checkbox"/>	Makes no effort to lead
<input type="checkbox"/>	Reasonably responsive	<input type="checkbox"/>	Tries but lacks ability
<input type="checkbox"/>	Understanding	<input type="checkbox"/>	Has some leadership promise
<input type="checkbox"/>	Very responsive	<input type="checkbox"/>	A fully matured leader
<b>Teamwork</b>		<b>Willingness to serve</b>	
<input type="checkbox"/>	Frequently causes friction	<input type="checkbox"/>	Reluctant to serve
<input type="checkbox"/>	Insists on having his / her own way	<input type="checkbox"/>	Occasionally serves
<input type="checkbox"/>	Usually cooperative	<input type="checkbox"/>	Usually willing to serve
<input type="checkbox"/>	Works well with others	<input type="checkbox"/>	Eager to serve as needed
<b>Achievement</b> [ability to formulate, execute & carry plans to conclusion]		<b>Christian Experience</b>	
<input type="checkbox"/>	Starts but does not finish	<input type="checkbox"/>	Relatively superficial
<input type="checkbox"/>	Does only what is assigned	<input type="checkbox"/>	Over-emotional
<input type="checkbox"/>	Meets average expectations	<input type="checkbox"/>	Genuine but mild
<input type="checkbox"/>	Superior creative ability	<input type="checkbox"/>	Rich & growing
<input type="checkbox"/>		<input type="checkbox"/>	Warmly contagious
<b>Motivation to do the Course</b> [tick next to as many as you feel are appropriate]			
<input type="checkbox"/>	Christian Service	<input type="checkbox"/>	Desire to spread the Gospel
<input type="checkbox"/>	Adventure	<input type="checkbox"/>	Travel
<input type="checkbox"/>	Desire to help others	<input type="checkbox"/>	Receive help / ministry
<input type="checkbox"/>	Other, please specify	<input type="checkbox"/>	Discipleship
<input type="checkbox"/>		<input type="checkbox"/>	Escape an unpleasant home situation

## LEADERSHIP QUALITIES

Listed below are some of the qualities that describe a leader. Please rate them as follows:

1 = weak      2 = developing      3 = average      4 = mature      5 = strong

<input type="checkbox"/>	Positive Contagious Spirit	<input type="checkbox"/>	Assurance of God's calling	<input type="checkbox"/>	Social poise
<input type="checkbox"/>	Ability to motivate others	<input type="checkbox"/>	Respect of other's beliefs	<input type="checkbox"/>	Self-confidence
<input type="checkbox"/>	Teachable attitude	<input type="checkbox"/>	Ability to communicate clearly	<input type="checkbox"/>	Able to deal interpersonally
<input type="checkbox"/>	Able to receive criticism	<input type="checkbox"/>	Personal hygiene / appearance	<input type="checkbox"/>	Emotional stability
<input type="checkbox"/>	Able to make decisions	<input type="checkbox"/>	Relating to opposite sex	<input type="checkbox"/>	Relating to others
<input type="checkbox"/>	Christian life & testimony	<input type="checkbox"/>	Marriage relationship (where applicable)		

Is the applicant responsible? Please explain if needed.


What is your evaluation of the applicant's promise as a leader?

<input type="checkbox"/>	1. He / she is definitely unsuited	<input type="checkbox"/>	He / she is an average prospect
<input type="checkbox"/>	2. At this time I feel he / she is not suited	<input type="checkbox"/>	He / she is an above average prospect
<input type="checkbox"/>	3. He / she is a good prospect, but I do have some reservations	<input type="checkbox"/>	He / she is an unusually exceptional prospect

**EFFECTIVENESS**

Listed below are some of the tendencies, which, if present, may reduce the effectiveness of the person. Please underline words or descriptions which may pertain to the applicant:

1. Impatient, intolerant, argumentative, domineering, arrogant or critical of others
2. Easily embarrassed, offended, or discouraged
3. Frequently worried, anxious, nervous or tense; given to moods; shy or self conscious
4. Prejudiced towards groups, races or nationalities
5. Given to exclusive and absorbing infatuations
6. Lacking in humour or in the ability to take a joke
7. Unable to cope with stress; erratic in attitudes or actions

Please tick here if the candidate seems relatively free from all such tendencies.

If you have noted any of these or similar limitations in the applicant, please elaborate below:


**PHYSICAL / SPIRITUAL WELLBEING**

Please comment briefly on the family and social background of the applicant:


Please describe any physical or mental limitations the applicant may have. Has the applicant had psychiatric treatment? Please explain.


Please use the space provided below to elaborate if the answer is YES to any of the following questions:

1. Has the applicant proven on any occasion to be unreliable, dishonest or of questionable character?	Yes		No	
2. As far as you know, has the applicant ever been arrested or cautioned for any offence other than minor traffic violations?	Yes		No	
3. To your knowledge, has the applicant ever been involved in drug/alcohol abuse, or the occult?	Yes		No	

Comments


**OTHER**

Have we overlooked anything which you consider relevant to this application?


<b>Signature</b>		<b>Date</b>	
------------------	--	-------------	--

## CONFIDENTIAL REFERENCE

**YEAR OF TRAINING | CREATIVE ARTS ACADEMY |  
SATURATION SCHOOL OF MISSIONS | SCHOOL OF THE WORD |  
YOUNG ENTREPRENEURS BUSINESS SCHOOL**



**TO BE COMPLETED BY A MATURE CHRISTIAN FRIEND**

### CANDIDATE'S DETAILS (TO BE COMPLETED PREFERABLY BY THE APPLICANT)

Applicant's Name			
Telephone		Email	
Course Applied for			
Start Date			

### JUBILEE TRAINING CENTRE

Jubilee Training Centre ([www.jubileetc.org.uk](http://www.jubileetc.org.uk)) was established in 2001 and operates under Jubilee Church Maidstone ([www.jubilee.co](http://www.jubilee.co)), which is part of Church of the Nations ([www.cotn.org](http://www.cotn.org)). It consists of 5 different schools – Year of Training, Creative Arts Academy, Saturation School of Missions, School of the Word and Young Entrepreneurs Business School – each specialising in a different area.

The person named above has listed you as their Church Minister or Leader and as such we would appreciate it if you would supply the information requested on this form in order to aid us in the evaluation of the applicant. The course they are applying for will equip them both theoretically and practically, and the students will at times find themselves in potentially stressful situations, which will provide them with an opportunity to utilise their skills. **It is therefore not in the applicant's best interest to give an unrealistically positive view of them.** An honest, realistic appraisal of the challenges they will face will help rather than hinder their application.

Please return this form to **Jubilee Training Centre directly – do NOT send it via the applicant.** We will need to receive it before we can process their application. Thank you.

#### Return Address:

The Administrator, Jubilee Training Centre, 9 Ashford Road, Maidstone, Kent, ME14 5BJ, UK

### REFEREE'S DETAILS

Referee's Name							
Current Address						Post Code	
Telephone				Email			
Preferred Method of Communication		Email		Letter		Phone	
How long have you known the applicant?				Months		Years	
What is your relationship to him / her?							
Do you feel you know this applicant well enough to complete this reference?		Yes		No			

### PERSONALITY / CHARACTER PROFILE

Please tick next to the option that best describes the applicant:

Physical Condition		Intelligence	
<input type="checkbox"/>	Very poor physical condition	<input type="checkbox"/>	Learns and thinks slowly
<input type="checkbox"/>	Poor physical condition	<input type="checkbox"/>	Average mental ability
<input type="checkbox"/>	Average physical condition	<input type="checkbox"/>	Alert, has a good mind
<input type="checkbox"/>	Above average physical condition	<input type="checkbox"/>	Brilliant, exceptional
<input type="checkbox"/>		<input type="checkbox"/>	

## PERSONALITY / CHARACTER PROFILE (CONTINUED...)

<b>Emotional Resilience</b> [to trying situations]		<b>Personality</b>	
	Gets angry, impulsive		Avoided by others
	Withdraws		Tolerated by others
	Gets discouraged easily		Liked by others
	Meets constructively		Well-liked by others
<b>Responsiveness</b> [to other's feelings]		<b>Leadership</b> [inspiring others; maintaining their confidence]	
	Slow to sense how others feel		Makes no effort to lead
	Reasonably responsive		Tries but lacks ability
	Understanding		Has some leadership promise
	Very responsive		A fully matured leader
<b>Teamwork</b>		<b>Willingness to serve</b>	
	Frequently causes friction		Reluctant to serve
	Insists on having his / her own way		Occasionally serves
	Usually cooperative		Usually willing to serve
	Works well with others		Eager to serve as needed
<b>Achievement</b> [ability to formulate, execute & carry plans to conclusion]		<b>Christian Experience</b>	
	Starts but does not finish		Relatively superficial
	Does only what is assigned		Over-emotional
	Meets average expectations		Genuine but mild
	Superior creative ability		Rich & growing
			Warmly contagious
<b>Motivation to do the Course</b> [tick next to as many as you feel are appropriate]			
	Christian Service		Desire to spread the Gospel
	Adventure		Travel
	Desire to help others		Receive help / ministry
	Other, please specify		Discipleship
			Escape an unpleasant home situation

## LEADERSHIP QUALITIES

Listed below are some of the qualities that describe a leader. Please rate them as follows:

1 = weak      2 = developing      3 = average      4 = mature      5 = strong

	Positive Contagious Spirit		Assurance of God's calling		Social poise
	Ability to motivate others		Respect of other's beliefs		Self-confidence
	Teachable attitude		Ability to communicate clearly		Able to deal interpersonally
	Able to receive criticism		Personal hygiene / appearance		Emotional stability
	Able to make decisions		Relating to opposite sex		Relating to others
	Christian life & testimony		Marriage relationship (where applicable)		
Is the applicant responsible? Please explain if needed.					
What is your evaluation of the applicant's promise as a leader?					
	1. He / she is definitely unsuited		He / she is an average prospect		
	2. At this time I feel he / she is not suited		He / she is an above average prospect		
	3. He / she is a good prospect, but I do have some reservations		He / she is an unusually exceptional prospect		

**EFFECTIVENESS**

Listed below are some of the tendencies, which, if present, may reduce the effectiveness of the person. Please underline words or descriptions which may pertain to the applicant:

1. Impatient, intolerant, argumentative, domineering, arrogant or critical of others
2. Easily embarrassed, offended, or discouraged
3. Frequently worried, anxious, nervous or tense; given to moods; shy or self conscious
4. Prejudiced towards groups, races or nationalities
5. Given to exclusive and absorbing infatuations
6. Lacking in humour or in the ability to take a joke
7. Unable to cope with stress; erratic in attitudes or actions

Please tick here if the candidate seems relatively free from all such tendencies.

If you have noted any of these or similar limitations in the applicant, please elaborate below:


**PHYSICAL / SPIRITUAL WELLBEING**

Please comment briefly on the family and social background of the applicant:


Please describe any physical or mental limitations the applicant may have. Has the applicant had psychiatric treatment? Please explain.


Please use the space provided below to elaborate if the answer is YES to any of the following questions:

1. Has the applicant proven on any occasion to be unreliable, dishonest or of questionable character?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
2. As far as you know, has the applicant ever been arrested or cautioned for any offence other than minor traffic violations?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
3. To your knowledge, has the applicant ever been involved in drug/alcohol abuse, or the occult?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Comments


**OTHER**

Have we overlooked anything which you consider relevant to this application?


<b>Signature</b>		<b>Date</b>	
------------------	--	-------------	--