



P.O. Box 873642, Wasilla, AK 99687 (410) 504-6409

www.kashabbatribes.com

INTERNSHIP APPLICATION INSTRUCTIONS

<p>Dear Applicant,</p> <p>Thank you for your interest in traveling with us as a Kashabba Tribe Ministries Intern!</p> <p>Attached is an application along with various forms and releases that MUST be completed to ensure your acceptance as a KTM Intern.</p> <p>Your application cannot be processed until Kashabba Tribe Ministries has received all of these completed documents. The following is a table of documents that are required:</p>	Application	Deposit Form	Liability Release	Discipline Policy	Ministry Team Training	Pastor's Evaluation	Confidential Evaluation	Picture of Applicant
IF YOU ARE CURRENTLY A PAID, PASTORAL STAFF MEMBER	●	●	●	●	●		●	●
IF YOU ARE AN INDIVIDUAL ACCOMPANIED BY YOUR PASTOR	●	●	●	●	●		●	●
IF YOU ARE TRAVELING WITHOUT YOUR PASTOR	●	●	●	●	●	●	●	●
IF YOU HAVE TRAVELED BEFORE ON A KASHABBA TRIBE MINISTRIES TEAM	*	●	●	●				●

*Please call the office so we can update your information in our database.

As you can see, Kashabba Tribe Ministries asks for a fairly in-depth amount of information. Some information required may be rather personal to you, but reasonable considering the scope of such a ministry trip.

Often, the first time an intern can be personally encountered is at the airport. Therefore, it is imperative that Kashabba Tribe Ministries has prior knowledge of each applicant's personal background before approval can be granted for participation in the internship. Please be assured that all information provided is kept strictly confidential within the leadership of Kashabba Tribe Ministries.

Please send all completed forms to the Kashabba Tribe Ministries address below. A mandatory deposit reserves your space in the internship pending review and approval of your application. Space is limited and on most internships, acceptance is based on a first come, first serve basis. If a deposit is not received with your application, your application will not be processed. Please make checks or money orders payable to: Kashabba Tribe Ministries. A deposit can be made by PayPal at no extra service charge. However, if you choose to pay for the whole

internship by PayPal, an additional 4% service charge will apply. All payments must be paid in U.S. dollars.

A Kashabba Tribe Ministries representative will contact you by phone or email when your application is approved. Acceptance will be confirmed or denied within 3 weeks of receiving your application. Upon acceptance, you will receive a packet including information about internship preparation, obtaining a passport and/or visa, immunizations, etc. Please do not apply for a visa until you receive your acceptance packet.

If you experience any uncertainty during the application process, or if you have any questions, please call Kashabba Tribe Ministries at (410) 504-6409 or email us at Missions@kashabbatribe.com. You can also visit our homepage at www.kashabbatribe.com for any additional information. Testimonies of past internships can be read... just a bunch of sons and daughters being used by an awesome God.

We at Kashabba Tribe Ministries are excited about your desire to join us in bringing the kingdom of God to East Africa. May the Lord bless you and continue to give you guidance as you seek His will!

In His Service,

Peter Neuberger, President
Kashabba Tribe Ministries

Kashabba Tribe Ministries
P.O. Box 873642
Wasilla, AK 99687
Phone: (410) 504-6409
Email: Missions@kashabbatribe.com

INTERNSHIP APPLICATION

I AM APPLYING FOR ACCEPTANCE AS A KASHABBA TRIBE MINISTRIES INTERN FOR:

 Tanzania, Africa
 DESTINATION (COUNTRY) DATES

NAME _____ NICKNAME* _____
 (EXACTLY AS IT APPEARS ON YOUR PASSPORT) NOTE: *ASTERISKED FIELDS WILL APPEAR ON NAMETAG

DATE OF BIRTH ___/___/___ GENDER Male Female OCCUPATION _____

STREET ADDRESS _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBERS

HOME (_____) _____ CELL (_____) _____

EMAIL _____ PASSPORT NUMBER _____

EMERGENCY CONTACT NAME _____

RELATIONSHIP _____ PHONE NUMBER (_____) _____

HAVE YOU PREVIOUSLY TRAVELED WITH KTM? Yes No IF SO, GIVE DATES _____

ARE YOU BORN AGAIN? Yes No Unsure ARE YOU SPIRIT-FILLED? Yes No Unsure

ARE YOU WILLING TO MINISTER CONSISTENT WITH KASHABBA TRIBE MINISTRIES GUIDELINES? Yes No

ARE YOU WILLING TO SUBMIT TO BEING MONITERED AND LOVINGLY CORRECTED IF NECESSARY? Yes No

IF MARRIED, DOES YOUR SPOUSE SUPPORT YOUR PARTICIPATION? Yes No SPOUSES NAME _____

DO YOU HAVE ANY PHYSICAL DISABILITY? Yes No IF SO, PLEASE DESCRIBE _____

HAVE YOU EVER BEEN TREATED FOR ANY MENTAL/EMOTIONAL CONDITION? Yes No IF SO, PLEASE DESCRIBE _____

PLEASE LIST ANY CONDITION THAT MAY LIMIT YOUR PARTICIPATION AND ANY MEDICATIONS YOU ARE CURRENTLY TAKING _____

PLEASE LIST ANY ALLERGIES TO FOOD, MEDICINE, ETC. _____

MEDICAL INSURANCE PROVIDER _____ POLICY # _____

PHONE (_____) _____ (IF POSSIBLE, OTHER THAN TOLL FREE NUMBER)

HOW WOULD YOU DESCRIBE YOUR TEMPERAMENT? _____

CHURCH NAME _____ DENOMINATION _____

CHURCH ADDRESS _____

CITY _____ STATE _____ ZIP _____

CHURCH PHONE (_____) _____ HOW LONG HAVE YOU ATTENDED? _____

NAME OF PASTOR _____ PHONE (_____) _____

DO YOU TITHE REGULARLY? Yes No DO YOU ATTEND CHURCH REGULARLY? Yes No
HAVE YOU BEEN WATER BAPTIZED? Yes No HAVE YOU BEEN BAPTIZED IN THE HOLY SPIRIT? Yes No

IN WHAT AREAS OF CHURCH LIFE ARE YOU CURRENTLY SERVING OR HAVE YOU SERVED IN THE PAST?

IS YOUR PRESENT INCOME DERIVED FROM BEING IN FULL TIME CHRISTIAN MINISTRY? Yes No

WHAT DO YOU BELIEVE ARE YOUR SPIRITUAL GIFTINGS? _____

HAVE YOU RECEIVED ANY MINISTRY TRAINING IN THE AREA OF HEALING? Yes No

IF SO, PLEASE DESCRIBE _____

HAVE YOU RECEIVED ANY OTHER CHRISTIAN MINISTRY TRAINING? Yes No

IF SO, PLEASE DESCRIBE _____

ARE YOU FLUENT IN ANY LANGUAGES OTHER THAN ENGLISH? Yes No

IF SO, NAME LANGUAGE(S) _____

I, _____, DECLARE THAT THE INFORMATION PROVIDED BY ME IN THIS APPLICATION IS TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE KASHABBA TRIBE MINISTRIES TO VERIFY ANY AND ALL INFORMATION PROVIDED ABOVE.

SIGNED: X _____ DATE ____/____/____

KASHABBA TRIBE MINISTRIES

P.O. BOX 873642

WASILLA, AK 99687

Phone: (410) 504-6409

Email: Missions@kashabbatribe.com



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DEPOSIT FORM

PLEASE NOTE: YOUR APPLICATION FOR KASHABBA TRIBE MINISTRIES TEAM PARTICIPATION CAN NOT BE PROCESSED UNLESS THE DEPOSIT AMOUNT IS INCLUDED WITH THIS FORM.

I, _____, WISH TO BE CONSIDERED AS A KASHABBA TRIBE
MINISTRIES INTERN FOR:

DESTINATION (CITY, COUNTRY)

DATES

DEPOSIT AMOUNT INCLUDED:

\$ _____

(\$400 PER PERSON PER INTERNSHIP)

Make checks payable to: Kashabba Tribe Ministries. Your deposit can be made by PayPal at no extra charge. However, if you choose to pay the balance of the internship by PayPal, an additional 4% charge will be applied. All payments must be made in U.S. Dollars.

CANCELLATION & REFUND POLICY

If you are not selected for an internship, your deposit will be refunded in full. After your application has been processed, you may cancel up to 8 weeks prior to your departure date in order to receive a \$200 refund of this deposit. If for any reason, a potential intern cancels after 8 weeks prior to the departure date; the full deposit will be forfeited. Final payment must be received BEFORE arrival to Tanzania. If for some reason you cancel your trip within 5 weeks of your departure date or after we have paid for your air flights, you will not be refunded for your ticket price. However, it is often the case that the ticket can be reused in the future less a change fee (varies between \$100-\$300+). Also, you will forfeit your deposit and there will be an additional \$100 late cancellation penalty. In addition, you will not be refunded monies that Kashabba Tribe Ministries has paid out on your behalf to secure accommodations, transportation, and food service reservations. Any amount over and above the deposit, airline ticket, late cancellation fee, and reservation monies spent on your behalf will be refunded to you!



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LIABILITY RELEASE

WARNING: THIS IS A COMPLETE RELEASE OF ANY POTENTIAL CLAIMS.

I, _____, **IN CONSIDERATION OF MY BEING ACCEPTED BY KASHABBA TRIBE MINISTRIES FOR PARTICIPATION AS A INTERN**

FOR _____
DESTINATION (COUNTRY) DATES

HEREBY DECLARE:

I am 18 years of age or older. (If not yet 18, you must be 18 before the internship starts, otherwise, you are not eligible at this time).

I am in good health and have received all vaccinations recommended by my county or state health department for travel in the countries or areas to be visited on this trip.

I acknowledge that International travel involves danger and risk. I acknowledge that the dangers and risks include, but not limited to, the hazards of travel by air, boat, raft, jeep, automobile, bus, taxi, bicycle, and on foot, travel in foreign countries, in jungles, mountains, high altitudes, steep terrain; travel and/or attendance at meetings among possibly unfriendly persons; malaria, sickness or injury in areas where medical assistance may be primitive or inadequate, unavailable or not readily available, and/or where rapid evacuation is not available; or where there is exposure to crime, to civil unrest and to forces of nature or other dangers. I understand that the above and other possibilities are risks in ministry/missions travel.

I acknowledge that Kashabba Tribe Ministries does not accept any responsibility for injury, illness or loss suffered by me, and that all medical or personal expenses in connection with or made necessary by my illness or injury on this trip are my own responsibility.

I acknowledge that Kashabba Tribe Ministries does not carry any insurance as noted in the acceptance letter, and I acknowledge that Kashabba Tribe Ministries has advised me that Kashabba Tribe Ministries does not accept any responsibility for any injury, loss or damage not covered by the above-mentioned insurance. I further acknowledge that Kashabba Tribe Ministries has recommended that I carry or obtain primary medical insurance to cover possible additional medical needs, especially related to previously existing medical conditions.

I hereby assume all risk of personal injury, sickness, or death, and damage to or loss of my personal property, and any delay, change or cancellation of travel arrangements, and any and all other damage or expenses I may suffer as a result of participation in this ministry/mission trip or in activities related to it. I agree to be fully responsible for my actions. Should I become ill or injured or suffer other damage, I will pay all costs involved including costs of evacuation and medical care I might receive.

Please carefully read and sign the other side of this page

IN CONSIDERATION OF MY BEING PERMITTED TO PARTICIPATE AS A KASHABBA TRIBE MINISTRIES INTERN ON THE ABOVE INTERNSHIP: (Please initial each paragraph)

I ACCEPT AND ASSUME ALL RISKS AND HAZARDS FROM THIS ACTIVITY, BOTH KNOWN AND UNKNOWN, INCLUDING BUT NOT LIMITED TO THE RISKS AND HAZARDS IDENTIFIED ABOVE.

Initial: _____

I HEREBY VOLUNTARILY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS AND INDEMNIFY KASHABBA TRIBE MINISTRIES, ITS DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, COORDINATORS, FACILITATORS, VOLUNTEERS, AND OTHER TEAM MEMBERS OR INTERNS FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, ACTIONS OR RIGHTS OF ACTIONS, WHICH ARE RELATED TO, ARISE OUT OF, OR ARE IN ANY WAY CONNECTED WITH MY PARTICIPATION IN THIS ACTIVITY, WHICH I NOW HAVE OR MAY HAVE IN THE FUTURE, SPECIFICALLY INCLUDING BUT NOT LIMITED TO THE NEGLIGENT ACTS OR OMISSIONS OF ANY PERSON SO RELEASED, HELD HARMLESS AND INDEMNIFIED, AND SPECIFICALLY INCLUDING CLAIMS RELATING TO ANY PERSONAL INJURY THAT I MAY SUFFER.

Initial: _____

I AGREE NOT TO MAKE A CLAIM, FILE SUIT OR DEMAND ANYTHING FOR ANY INJURY, DEATH OR LOSS THAT ARISES FROM MY PARTICIPATION IN THIS ACTIVITY.

Initial: _____

I AGREE TO PAY THE COSTS AND/OR LEGAL EXPENSES INCURRED BY THE INTERNSHIP LEADER(S), ORGANIZERS AND/OR PARTICIPANTS AS A RESULT OF ANY CLAIM OR SUIT FILED BY ME, OR FILED BY ANYONE ELSE AS A RESULT OF MY CONDUCT.

Initial: _____

I CONSENT AND AGREE TO PAY FOR ANY MEDICAL TREATMENT RENDERED TO ME BY ANYONE FOR ANY INJURY OR OTHER MEDICAL SITUATION DURING, OR RESULTING FROM, MY PARTICIPATION.

Initial: _____

I AUTHORIZE KASHABBA TRIBE MINISTRIES TO ARRANGE FOR TRANSPORTATION, FOOD, AND LODGING FOR ME ON THIS TRIP.

Initial: _____

I AGREE THAT THESE PROMISES, AGREEMENTS, ASSUMPTIONS OF RISK AND RELEASES BIND ME, MY FAMILY, ALL MINORS WITH ME OR ON WHOSE BEHALF I SIGN, AND MY HEIRS OR LEGAL REPRESENTATIVES AND ASSIGNS.

Initial: _____

I HAVE READ CAREFULLY AND UNDERSTAND THIS LIABILITY RELEASE. I AM AWARE THAT I AM GIVING UP IMPORTANT LEGAL RIGHTS AND SIGN OF MY OWN FREE WILL.

SIGNATURE _____ DATE ____/____/____

PRINT NAME _____

FULL ADDRESS _____

DISCIPLINE POLICY

"If your brother sins, go and show him his fault in private; if he listens to you, you have won your brother. But if he does not listen to you, take one or two more with you, so that BY THE MOUTH OF TWO OR THREE WITNESSES EVERY FACT MAY BE CONFIRMED. If he refuses to listen to them, tell it to the church; and if he refuses to listen even to the church, let him be to you as a Gentile and a tax collector." –Matthew 18:15-17

It is the intent of Kashabba Tribe Ministries to follow the biblical patterns of discipline within the confines of all internships. Kashabba Tribe Ministries internships are attempting to train and raise up the next generation of leaders in countries, often attracting spiritual warfare. *1 John 2:1- "My little children, I am writing these things to you so that you may not sin And if anyone sins, we have an Advocate with the Father, Jesus Christ the righteous."* The goal of Kashabba Tribe Ministries is to create a safe, healthy environment, in order to minister to the people of the country visited.

We recognize that Ministry Team Members must be in correct relationship with God and with others, in order to ensure completion of mission objectives. The consequences of one's sin or disobedience have the potential to bring confusion and destruction to any ministry trip. We desire to come along side each Ministry Team Member in loving correction only when necessary. All compliance with any disciplinary action by Kashabba Tribe Ministries is greatly appreciated. All discipline will be administered with the goal of restoration.

Below are procedures that will be followed by Kashabba Tribe Ministries leadership, if any disciplinary action is necessary. To avoid any misunderstanding, please read the outlined procedures below, sign the consent form, and return it to Kashabba Tribe Ministries. By consenting to the following, you agree to receive correction, public rebuke and/or removal, if decided necessary by Kashabba Tribe Ministries leadership. If issues of sin or disobedience come to light, rest assured, the steps below will be followed to bring resolution to the situation.

1. If you have a problem with any individual, you are to lovingly approach that person first, without going to any other Intern or Ministry Team Member. Attempt to bring understanding and resolution to the conflict. If it is with someone of the opposite sex, please talk with him or her in a place where others are present, but can not hear your conversation. Many times what you may consider a problem is simply a misunderstanding and bringing it to their attention often brings resolution.
2. If you find no resolution after you have conversed with the individual, the individuals involved are required to discuss the problem with a Ministry Team Leader. The Ministry Team Leader should be able to determine what the problem is, who is at fault, and bring closure to the situation.
3. If the Ministry Team Leader discovers that there has been no closure to the situation, there will be another meeting with the parties involved, the Ministry Team Leader, and the Event Coordinator in order bring closure to the difficult situation.

<<<<<< OVER >>>>>>

4. If the Ministry Team Leader and Event Coordinator find any individual to be in *rebellion to correction*, a senior Kashabba Tribe Ministries representative will be informed. A senior KTM representative will bring definite closure to the situation, in which all parties will be present to hear the final conclusion of the matter. Possible conclusions may include an individual returning home within 24 hours or being brought before the whole Ministry Team for public correction. If absolutely necessary, the Ministry Team will be informed not to have any personal contact with the individual throughout the remainder of the trip. The individual will not be permitted to eat, sleep, or travel with any Ministry Team Member.

5. If any individual is involved in any sin that can not, at the discretion of leadership, be taken care of in a timely manner or would affect the team in an adverse way, leadership reserves the right to put procedure (4) into action immediately.

I AGREE TO FOLLOW THE DISCIPLINE PROCEDURES LISTED ABOVE IF DIRECTLY INVOLVED IN CONFLICT. AS A MINISTRY TEAM MEMBER I AGREE TO FOLLOW THE DIRECTIONS AND DECISIONS MADE BY KASHABBA TRIBE MINISTRIES LEADERSHIP REGARDING OTHER MINISTRY TEAM MEMBERS.

SIGNED: X _____ DATE ____/____/____

MEDIA RELEASE

Kashabba Tribe Ministries often takes photographs and video footage on internships using them in Kashabba Tribe Ministries advertising, promotional materials, web page, and publications. In signing below, you fully authorize Kashabba Tribe Ministries to use video or photographs taken of you in any or all of the above mentioned materials.

I AUTHORIZE KASHABBA TRIBE MINISTRIES TO USE ANY PHOTOGRAPHS OR VIDEO FOOTAGE TAKEN OF MYSELF IN ANY AND ALL PUBLICATIONS MENTIONED ABOVE.

SIGNED: X _____ DATE ____/____/____

KASHABBA TRIBE MINISTRIES
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PHONE: (410) 504-6409
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Kashabba Tribe Ministries



EVERY tribe
EVERY tongue

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PASTORAL REFERENCE EVALUATION

I, _____, WISH TO BE CONSIDERED AS A KASHABBA TRIBE MINISTRIES INTERN

FOR: _____
DESTINATION (CITY, COUNTRY) DATES

I GIVE MY FULL CONSENT THAT _____ COMPLETE THIS
NAME OF REFERENCE

PASTORAL REFERENCE EVALUATION AND RELEASE IT TO KASHABBA TRIBE MINISTRIES.

SIGNED: X _____ DATE ____/____/____

Dear Pastor/Church Leader,

The applicant above has applied to be on a Kashabba Tribe Ministries Internship. We take seriously our responsibility toward those to whom we minister, both here and abroad. Therefore, Kashabba Tribe Ministries greatly appreciates your supplying the information requested on this form. Please return this form DIRECTLY TO OUR OFFICE upon completion. Thank You!

How long have you been acquainted with the applicant? _____

In which area(s) of church life has the applicant served, and in which area(s) is he/she currently serving?

Evaluation of Applicant's Emotional & Spiritual Maturity: The applicant must be able to accommodate himself/herself readily to unaccustomed living conditions and new social situations. Adjustment may have to be made as to diet, social customs, climate changes, etc. Keeping in mind the challenge of these unusual demands, please rate this applicant by checking a block under each of the following categories:

PHYSICAL CONDITION

- Frequently incapacitated
- Somewhat below par
- Fairly healthy
- Good health

EMOTIONAL RESILIENCE

(In trying situations)

- Gets angry; impulsive
- Withdrawn
- Gets discouraged easily
- Meets constructively
- Unusual ability to lead

ACHIEVEMENT

(Ability to formulate, execute & carry plans to conclusion)

- Starts but doesn't finish
- Does only what is assigned
- Meets average expectations
- Superior creative ability

SOCIAL INTERACTION

- Avoided by others
- Tolerated by others
- Liked by others
- Well-liked by others

WILLINGNESS TO SERVE

- Reluctant to serve
- Motives confused
- Usually willing to serve
- Eager to serve as needed

LEADERSHIP

(Ability to inspire others & maintain their confidence)

- Makes an effort to lead
- Tries but lacks ability
- Has some leadership promise

TEAMWORK

- Frequently causes friction
- Insists on having own way
- Usually cooperative
- Works well with others
- Energized by teamwork

INTELLIGENCE

- Learns and thinks slowly
- Average mental ability
- Alert; has a good mind
- Brilliant, exceptional

CHRISTIAN EXPERIENCE

- Relatively superficial
- Over-emotional
- Genuine but mild
- Rich and growing
- Warmly contagious

RESPONSIVENESS

(To the feelings and needs Of others)

- Slow to sense how others feel
- Reasonably responsive
- Understanding & Thoughtful
- Extremely responsive

PRAYER MINISTRY

(Praying for inner and physical healing)

- Has had much experience and expertise
- Has some training and experience
- Has not been trained and is very new at this

Evaluation of applicant's skills, training, profession, or trade. (Answer only if you have first hand info)

- ____ Incompetent
- ____ Doubtful
- ____ Adequate
- ____ Superior in competence

In what other skills or areas is he/she well qualified?

Listed below are some of the tendencies which, if present, may reduce the effectiveness of the applicant.

Please Circle any words or descriptions which pertain to applicant:

- | | | | |
|----------------------|---------------------|-------------------|----------------------------|
| Impatient | Argumentative | Domineering | Cocky |
| Easily offended | Critical of others | Anxious | Easily embarrassed |
| Easily discouraged | Frequently worried | Nervous or tense | Given to moods |
| Intolerant | Lacking in humor | Can't take a joke | Unable to cope with stress |
| Erratic in attitudes | Racially Prejudiced | Self-absorbed | |

If the applicant seems relatively free from all such tendencies, check here _____

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

Is the applicant financially responsible? Yes No

Please describe any physical limitations the applicant may have.

Please use a separate sheet of paper to elaborate if the answer is "yes" to any of the following questions:

- a) Has the applicant proven on any occasion to be unreliable, dishonest, or of questionable character?
- b) As far as you know, has the applicant ever been arrested for any offense other than minor traffic violations?
- c) To your knowledge, has the applicant ever been involved in drug abuse, homosexuality, or the occult?
- d) Has the applicant had psychiatric treatment?
- e) Are you aware of any unresolved problems in their life? (Ex: unrepentance, anger, unforgiveness, impurity)

If the answers to a), b), c) d), and e) above are all "no", please check here _____

What is your overall evaluation of the applicant's promise as a Kashabba Tribe Ministries Team participant?

- | | |
|--|--|
| ____ He/she is definitely unsuited | ____ He/she is an average prospect |
| ____ At this time I feel he/she is not suited | ____ He/she is an above average prospect |
| ____ He/she is a good prospect, but I do have reservations | ____ He/she is an unusually exceptional prospect |

Check any of the following that you feel are motivating the applicant to become involved with a Kashabba Tribe Ministries Internship:

- | | | |
|------------------------|---------------------------------------|-------------------|
| ____ Christian Service | ____ Desire to spread the gospel | ____ Other: _____ |
| ____ Travel | ____ Desire to help others | |
| ____ Adventure | ____ Receive help, ministry | _____ |
| ____ Discipleship | ____ Escape unpleasant home situation | |

REFERENCE NAME _____

ADDRESS _____

PHONE (____) _____

SIGNATURE: X _____

PLEASE MAIL DIRECTLY TO:
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P.O. BOX 873642
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EVERY tribe
EVERY tongue

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CONFIDENTIAL REFERENCE EVALUATION

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FOR: _____
DESTINATION (CITY, COUNTRY) DATES

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NAME OF REFERENCE

CONFIDENTIAL REFERENCE EVALUATION AND RELEASE IT TO KASHABBA TRIBE MINISTRIES.

SIGNED: X _____ DATE ____/____/____

Dear Friend of the Applicant,

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(In trying situations)

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Please Circle any words or descriptions which pertain to applicant:

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|----------------------|---------------------|-------------------|----------------------------|
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| Easily offended | Critical of others | Anxious | Easily embarrassed |
| Easily discouraged | Frequently worried | Nervous or tense | Given to moods |
| Intolerant | Lacking in humor | Can't take a joke | Unable to cope with stress |
| Erratic in attitudes | Racially Prejudiced | Self-absorbed | |

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Please describe any physical limitations the applicant may have.

Please use a separate sheet of paper to elaborate if the answer is "yes" to any of the following questions:

- f) Has the applicant proven on any occasion to be unreliable, dishonest, or of questionable character?
- g) As far as you know, has the applicant ever been arrested for any offense other than minor traffic violations?
- h) To your knowledge, has the applicant ever been involved in drug abuse, homosexuality, or the occult?
- i) Has the applicant had psychiatric treatment?
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If the answers to a), b), c) d), and e) above are all "no", please check here _____

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

Check any of the following that you feel are motivating the applicant to become involved with a Kashabba Tribe Ministries Ministry Team:

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Christian Service | <input type="checkbox"/> Desire to spread the gospel | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Travel | <input type="checkbox"/> Desire to help others | |
| <input type="checkbox"/> Adventure | <input type="checkbox"/> Receive help, ministry | _____ |
| <input type="checkbox"/> Discipleship | <input type="checkbox"/> Escape unpleasant home situation | |

REFERENCE NAME _____

ADDRESS _____

PHONE (_____) _____

SIGNATURE: X _____

PLEASE MAIL DIRECTLY TO:
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