



STUDENT APPLICATION FORM



APPLICATION FORM

SOUTH WEST EQUIPPING AND TRAINING (SWEAT)



HOW TO COMPLETE THIS APPLICATION

Thank you for your interest in **South West Equipping and Training Centre (SWEAT)**! The application form has been designed to assist you, your church, and us at SWEAT to prayerfully evaluate whether your application 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 5]

SECTION B – PASSPORT & VISA INFORMATION [PAGE 12]

Please complete this section in full. 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 Home Office directly (www.ind.homeoffice.gov.uk)

SECTION C – CONFIDENTIAL REFERENCES [PAGES 12 AND 18]

Enclosed with this application are 3 Confidential Reference Forms of which 2 need to be completed by referees of your choice. Please choose 2 of the following 3 options:

- your church leader
- A mature Christian friend
- your employer or teacher

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 SWEAT** as soon as possible as we are not able to process your application until we have received these.

SECTION D – LIABILITY, CONSENT, COMMITMENT & TERMINATION OF INVOLVEMENT [PAGE 13]

Please read this section carefully and sign where indicated.

SECTION E – MEDICAL REPORT [PAGE 15]

A Medical Report is included. *Section A* is to be completed by you and *Section B* by your doctor. Please give the entire report to your Doctor (both section A and B), along with a stamped and addressed envelope so that he/she can post it **directly to SWEAT**.

ADMINISTRATION FEE

A fee of £100 (which covers the cost of processing your application and ordering your SWEAT uniform) should be included when you return this form (Please see the Financial Policy page 4 for more details of how to pay) Foreign students can send this by bank draft in **Pounds Sterling only**.

TO AID YOUR COMPLETION OF YOUR APPLICATION

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

- Read and understood the Financial Policy sheet
- Completed and signed the Application Form (Section A & B)
- Entered the required details on 2 of the Reference Forms and sent them to your referees to return
- Completed the Medical Report – including the section to be completed by a doctor
- Attached a copy of passport and visa (if applicable) or another form of identification
- Signed the Indemnity Form along with 2 witnesses (Section D)
- Attached 2 ID photos to the Application Form
- Included details of your clothing sizes for your SWEAT uniform on your application (S, M, L, XL)
- Enclosed £100 Administration Fee

On completion of your application, please post all relevant documentation (see above) to:

Administration Office
South West Equipping & Training
31 Billacombe Road
Plymstock
Plymouth
Devon
PL9 7HX

NB. PLEASE BRING YOUR ORIGINAL EDUCATION CERTIFICATES WITH YOU WHEN YOU START AT SWEAT SO WE CAN REGISTER YOU FOR THE SATS ACCREDITED STUDIES

QUERIES

Please contact the SWEAT Training Centre should you have any questions or queries:
sweatoffice@cotnlivingwell.org.uk Tel: 01752 244639

FINANCIAL POLICY

The Financial Policy has been designed to explain the financial costs of studying at SWEAT and how the fees are spent. It also gives a breakdown of when fees are due.

WHAT THE FEES COVER

SWEAT fees cover the cost of tuition, board and lodgings and accredited SATs studies for the duration of the course (September to graduation in July). In detail they cover:

- 2 weeks orientation - food, accommodation and activities
- Food for all meals (except during holiday breaks)
- Internal rental costs for the use of accommodation and lecturing facilities
- Travel costs – to and from lectures and for any organised activities or outreach events that take place within the UK
- National mission – food, accommodation & travel
- All resources, books, DVD's, musical instruments, technical equipment, etc, used for lectures
- General upkeep of the residential properties
- Internet usage
- Contribution towards the running of the Training Centre office

OVERALL COST & DUE DATES FOR PAYMENT

The total fees of £8000 to attend SWEAT should be paid in three separate instalments at the beginning of each term September, January and April. We ask that upon submission of this application form you pay £100 to cover administration and uniform costs. This amount will be deducted from your total fees.

Accommodation (food & lodgings)	£4500
Tuition Fees	£2500
SATS accredited studies (Certificate in Christian Studies)	£1000
Total	£8000

NB. Personal expenses such as toiletries, telephone usage and leisure are not included in course fees

ADDITIONAL COSTS

International Mission - depending on location and duration of mission

Students fundraise as a team to cover this amount; however, each student is personally responsible for paying any shortfall prior to going on the international mission, which usually takes place in the last month of the course

SPECIAL CIRCUMSTANCES

SWEAT is a faith-based organisation and therefore 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 SWEAT, 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. The banking details are as follows: **Direct bank transfers are to be made to South West Equipping And Training, Lloyds TSB Bank, Sort Code 30-94-58, Account No. 01742778. Cheques are payable to South West Equipping and Training.**

PLEASE AFFIX
2 ID PHOTOS HERE

[1 photo will be used
for your student card]

APPLICATION FORM

SOUTH WEST EQUIPPING AND TRAINING (SWEAT)

CONFIDENTIAL



SWEAT TRAINING CENTRE

For Office Use Only

ADMIN FEE	VISA REQUIRED	CONF. REF. 1	CONF. REF. 2	STUDENT NUMBER

SECTION A – PERSONAL INFORMATION

COURSE DETAILS

South West Equipping & Training (SWEAT)

Course Start Date September 20 __

PERSONAL INFORMATION

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

NEXT OF KIN

In case of an emergency, who should we contact?

Name & Surname

Relationship to you

Home Tel. No.

Mobile No.

Address

Post Code

LANGUAGES

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

Please note that you are required to communicate (spoken & written) proficiently in English prior to attending South West Equipping And Training

MARITAL STATUS

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 SWEAT

DEPENDANTS

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.

5.

EMPLOYMENT HISTORY

Main Activity Currently?

	School		College / University		Secular Employment		Unemployed
	Other – please specify						

Current Employment (if applicable)

Employer	
Job Title	
Job Description	
Date Commenced	
Full / Part time	

Past Employment (if applicable)

Employer	Job Title	Job Description	Dates

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

GIFTINGS, TALENTS & HOBBIES

Do you play a musical instrument?		<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If yes, which one(s)	1.			3.	
	2.			4.	
Giftings / Talents					
Hobbies					

Feel free to describe some achievements you feel are highlights over your lifetime so far:

CHURCH INFORMATION

Which church / fellowship are you submitted to?					
Who do you wish us to contact at this church for a reference?					
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 SWEAT Training Centre?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	Yes, with reservations	<input type="checkbox"/>	No
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CHRISTIAN & LIFE EXPERIENCE (PLEASE USE A SEPARATE PIECE OF PAPER IF NECESSARY)

Please answer the following questions as briefly as possibly:

1. How did you hear about SWEAT Training Centre?

2. What is your reason for applying for the particular SWEAT Training Centre course?

CHRISTIAN & LIFE EXPERIENCE CONTINUED...(PLEASE USE A SEPARATE PIECE OF PAPER IF NECESSARY)

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. How would you describe your Christian life and your present relationship with Jesus Christ?

6. Briefly describe any other spiritual experiences and / or significant events in your Christian life.

7. What responsibility or experience have you had in a local church (i.e. youth leader, etc)?

PHYSICAL & SPIRITUAL WELLBEING

This section will **NOT** influence our decision when considering your application. It will however help us facilitate your physical & spiritual wellbeing whilst studying at SWEAT.

Please tick the box if you HAVE been involved in any of the following:

<input type="checkbox"/>	Drug or alcohol addiction	<input type="checkbox"/>	Homosexual or lesbian activity	
<input type="checkbox"/>	Occult Practices (e.g. astrology, martial arts, palm reading, etc)			
Do you smoke?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Please give details if you have answered YES to any of the above questions

FINANCES

Please read the **Financial Policy Sheet** (page 4) before completing this section. Each student is 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 year, in full, upfront?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If NOT, please answer the following questions:

£	Is what I have at the present time towards the school fees
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£	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?

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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.

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Do you intend on working part time whilst attending SWEAT?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Have you ever been declared bankrupt or incurred any Court County Judgements (i.e. black listed)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If YES, please give details below:

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CRIMINAL OFFENCES

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?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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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?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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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?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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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 or charitable or other organisation or body working with children or young people in relation to your behaviour with children and young people?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If YES, please give details

SECTION B – PASSPORT & VISA INFORMATION

PASSPORT & VISA INFORMATION				
Country of Birth		Nationality		
Country of Residence (if different from above)				
Please answer the following questions if you are NOT a UK citizen:				
Do you require a visa to enter or study in the United Kingdom?		Yes		No
Do you require SWEAT to send you the necessary documentation to apply for a student visa?		Yes		No
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		
Please use a tick to indicate that you have enclosed the following with this application:				
	Copy of your passport, drivers licence, birth certificate or ID card (for identification purposes)			
	Copy of a valid visa for entering and studying in the UK (if applicable) OR			
	I will send you a copy of my visa once it has been approved			

Please note that SWEAT does not tolerate any abuse of visa status and works closely with the Home Office to report any such abuse.

SECTION C – CONFIDENTIAL REFERENCES

CONFIDENTIAL REFERENCES				
Attached are 3 Confidential Reference forms of which 2 need to be completed by your chosen Referees and returned directly to SWEAT as soon as possible (for further information, please see 'Section C – References' on page 2 of this application form).				
Who have you sent the Confidential Reference forms to?				
Referee 1				
Name & Surname				
Relationship to you				
Home Tel. No.		Mobile No.		
Address				Post Code
Referee 2				
Name & Surname				
Relationship to you				
Home Tel. No.		Mobile No.		
Address				Post Code

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

LIABILITY, CONSENT, COMMITMENT & TERMINATION OF INVOLVEMENT			
<p>Release of Liability</p> <p>In the absence of any negligence or other breach of duty by South West Equipping And Training Centre, participation in the South West Equipping And Training Centre (SWEAT) programme, event or outreach is entirely at the participants 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 South West Equipping And Training Centre.</p>			
Applicant's Signature		Date	
<p>Consent for Treatment</p> <p>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 South West Equipping And 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 South West Equipping And 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.</p>			
Applicant's Signature		Date	
<p>Commitment</p> <ul style="list-style-type: none"> ▪ I have completed all portions of this application truthfully and to the best of my knowledge, and if accepted by South West Equipping And Training Centre, I will, under God, abide by the spirit, authority and schedule of the programme. ▪ I understand that South West Equipping And 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 South West Equipping And Training Centre 			
Applicant's Signature		Date	
<p>Termination of Involvement</p> <p>South West Equipping And Training Centre reserves the right to terminate my involvement with them if I am found to have misled South West Equipping And Training Centre in any way, or if my conduct is prejudicial to the good running of the course or to the reputation of Living Well 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.</p>			
Applicant's Signature		Date	

LIABILITY, CONSENT, COMMITMENT & TERMINATION OF INVOLVEMENT WITNESSES**Witness 1**

Name		Date	
Signature			

Witness 2

Name		Date	
Signature			

SECTION E – MEDICAL REPORT



SWEAT TRAINING CENTRE

SECTION A - TO BE COMPLETED BY THE APPLICANT

TO THE APPLICANT

Please complete Section A of this report yourself. Then take it to your General Practitioner or other Doctor who has recently looked after you and have him/her complete the last page.

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

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

GENERAL HEALTH

Are you able to walk up to 6 miles (10 kilometres) in a day?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If NO, please explain				
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Are you able to carry out reasonably strenuous physical work?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If NO, please explain				
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Are you presently in good health?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If NO, please explain				
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FOR WOMEN ONLY

Have you had any problems with pregnancy or menstrual periods?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If YES, please explain				
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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.

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.	
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 are currently receiving treatment or have received treatment for in the past (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 South West Equipping And Training Centre prior to training or service with the school.	
Signature	
Date	

When you have completed this report (Section A), take both sections to your doctor who will complete the rest. Please give your doctor a stamped and addressed envelope so that he/she can post it **directly to South West Equipping And Training Centre.**

MEDICAL REPORT

SECTION B - TO BE COMPLETED BY THE DOCTOR WHO HOLDS THE APPLICANT'S MEDICAL RECORDS

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, but the practical field placement may involve work in primitive situations anywhere in the world. Please make any comments or additions on the following:			
PAST MEDICAL HISTORY			
RELEVANT FAMILY MEDICAL HISTORY			
CURRENT MEDICATION			
WEIGHT and GENERAL FITNESS			
GENERAL HEALTH			
Is the applicant free from INFECTIOUS DISEASES			
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 completed form to South West Equipping And Training, 31 Billacombe Road, Plymstock, Plymouth, Devon, PL9 7HX			

CONFIDENTIAL REFERENCE

SOUTH WEST EQUIPPING & TRAINING



SWEAT TRAINING CENTRE

TO BE COMPLETED BY YOUR CHURCH MINISTER OR LEADER

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

Applicant's Name			
Current Address			Post Code
Telephone		Email	
Course Start Date			

SOUTH WEST EQUIPPING AND TRAINING CENTRE (SWEAT)

SWEAT (www.whatissweat.co.uk) was established in 2009 and operates under Living Well Church, Plymouth (www.cotnlivingwell.org.uk), which is part of Church of the Nations (www.cotn.org). 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 **SWEAT directly – do NOT send it via the applicant.** We will need to receive it before we can process their application. Thank you.

Return Address:

Administration Office, SWEAT, 31 Billacombe Road, Plymstock, Plymouth, Devon, PL9 7HX

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"/>	Frequently incapable	<input type="checkbox"/>	Learns and thinks slowly
<input type="checkbox"/>	Somewhat below par	<input type="checkbox"/>	Average mental ability
<input type="checkbox"/>	Fairly healthy	<input type="checkbox"/>	Alert, has a good mind
<input type="checkbox"/>	Good health	<input type="checkbox"/>	Brilliant, exceptional

PERSONALITY / CHARACTER PROFILE (CONTINUED...)

Emotional Resilience [to trying situations]		Personality	
	Gets angry, impulsive		Avoided by others
	Withdraws		Tolerated by others
	Gets discouraged easily		Liked by others
	Meets constructively		Well-liked by others
Responsiveness [to other's feelings]		Leadership [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
Teamwork		Willingness to serve	
	Frequently causes friction		Reluctant to serve
	Insists on having his / her own way		Motives confused
	Usually cooperative		Usually willing to serve
	Works well with others		Eager to serve as needed
Achievement [ability to formulate, execute & carry plans to conclusion]			
	Starts but does not finish		
	Does only what is assigned		
	Meets average expectations		
	Superior creative ability		

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		Respect of other's beliefs		Social poise
	Ability to motivate others		Ability to communicate clearly		Self-confidence
	Teachable attitude		Personal hygiene / appearance		Able to deal interpersonally
	Able to receive criticism		Relating to opposite sex		Emotional stability
	Able to make decisions		Relating to others		
	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 / EMOTIONAL 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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2. As far as you know, has the applicant ever been arrested or cautioned for any offence other than minor traffic violations?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Comments

OTHER

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

Signature

Date



TO BE COMPLETED BY YOUR EMPLOYER OR TEACHER
SOMEONE WHO KNOWS YOU IN A WORK OR CLASSROOM SETTING

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

Applicant's Name			
Current Address			Post Code
Telephone		Email	
Course Start Date			

SOUTH WEST EQUIPPING AND TRAINING CENTRE (SWEAT)

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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"/> Frequently incapable	<input type="checkbox"/> Learns and thinks slowly
<input type="checkbox"/> Somewhat below par	<input type="checkbox"/> Average mental ability
<input type="checkbox"/> Fairly healthy	<input type="checkbox"/> Alert, has a good mind
<input type="checkbox"/> Good health	<input type="checkbox"/> Brilliant, exceptional

PERSONALITY / CHARACTER PROFILE (CONTINUED...)

Emotional Resilience [to trying situations]		Personality	
	Gets angry, impulsive		Avoided by others
	Withdraws		Tolerated by others
	Gets discouraged easily		Liked by others
	Meets constructively		Well-liked by others
Responsiveness [to other's feelings]		Leadership [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
Teamwork		Willingness to serve	
	Frequently causes friction		Reluctant to serve
	Insists on having his / her own way		Motives confused
	Usually cooperative		Usually willing to serve
	Works well with others		Eager to serve as needed
Achievement [ability to formulate, execute & carry plans to conclusion]			
	Starts but does not finish		
	Does only what is assigned		
	Meets average expectations		
	Superior creative ability		

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		Respect of other's beliefs		Social poise
	Ability to motivate others		Ability to communicate clearly		Self-confidence
	Teachable attitude		Personal hygiene / appearance		Able to deal interpersonally
	Able to receive criticism		Relating to opposite sex		Emotional stability
	Able to make decisions		Relating to others		
	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 / EMOTIONAL 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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2. As far as you know, has the applicant ever been arrested or cautioned for any offence other than minor traffic violations?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Comments

OTHER

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

Signature

Date



TO BE COMPLETED BY A MATURE CHRISTIAN FRIEND

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

Applicant's Name			
Current Address			Post Code
Telephone		Email	
Course Start Date			

SOUTH WEST EQUIPPING AND TRAINING CENTRE (SWEAT)

SWEAT (www.whatissweat.co.uk) was established in 2009 and operates under Living Well Church, Plymouth (www.cotnlivingwell.org.uk), which is part of Church of the Nations (www.cotn.org). The person named above has listed you as a mature Christian friend 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 **SWEAT directly – do NOT send it via the applicant.** We will need to receive it before we can process their application. Thank you.

Return Address:
Administration Office, SWEAT, 31 Billacombe Road, Plymstock, Plymouth, Devon, PL9 7HX

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"/>	Frequently incapable	<input type="checkbox"/>	Learns and thinks slowly
<input type="checkbox"/>	Somewhat below par	<input type="checkbox"/>	Average mental ability
<input type="checkbox"/>	Fairly healthy	<input type="checkbox"/>	Alert, has a good mind
<input type="checkbox"/>	Good health	<input type="checkbox"/>	Brilliant, exceptional

PERSONALITY / CHARACTER PROFILE (CONTINUED...)

Emotional Resilience [to trying situations]		Personality	
	Gets angry, impulsive		Avoided by others
	Withdraws		Tolerated by others
	Gets discouraged easily		Liked by others
	Meets constructively		Well-liked by others
Responsiveness [to other's feelings]		Leadership [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
Teamwork		Willingness to serve	
	Frequently causes friction		Reluctant to serve
	Insists on having his / her own way		Motives confused
	Usually cooperative		Usually willing to serve
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