



Formation Training Course Application Form

1. Personal Details

Full Name.....

Address.....

.....

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Postcode

Telephone Number: Home

Mobile

Email

Date of Birth

Marital Status

2. Education

Briefly outline your general education re secondary school and beyond

3. Christian Background and Experience

a. Please give a brief summary of how you became a Christian and the impact that being a Christian has had on your life.



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b. Explain the opportunities you have had to be involved in any form of ministry in your church.

c. Explain why you would like to join the Formation Training Program at CYM

4. References

Please give the names and addresses of two people who know you well and have witnessed your involvement in Church life and who will be prepared to prayerfully support you in your training.

Please return the completed form to
Linda Pepper
CYM
6, Great Colman Street
Ipswich, Suffolk
IP4 2AD