

Internship Application



Summer 2007

Application Use

This application form is used to apply for all Christ Central Ministry internships.

Make a copy of your application for your personal records before sending it to CCM.

Please sign each page of your application before sending it to us. You may use additional sheets of paper to provide more detailed information than what may fit within the space provided on various questions of your application

Make sure your application is complete before submitting it. You may mail, fax, or drop off in person at the address listed below.

Our internships are unpaid. However we will provide you with housing, food, and a meaningful opportunity to effect social change.

Christ Central Institute
100 Railroad Avenue East
PO BOX 387
Wagener, SC 29164

Personal Information

Name: _____

Street Address: _____

City/State/Zip: _____

Telephone: _____

Email: _____

When are you available to perform your internship?

Earliest possible start date (mm/dd/yyyy): ____-____-_____

End date (mm/dd/yyyy): ____-____-_____

Which CCM activities are you interested in ? (Please rank your top three choices 1-2-3).

_____ **ORGANIZING** (past interns have put together educational events at schools and churches for national hunger and homelessness awareness week and worked with people experiencing homelessness.)

_____ **POLICY RESEARCH** (begin to research and develop a variety of fact sheets on issues facing youth, battered woman, low income working families, homeless families, and homeless adults struggling with mental illnesses.)

_____ **COMMUNICATIONS** (begin the process of developing a CCM newsletter, develop powerpoint presentations, and created displays)

_____ **COMMUNITY CHANGE** (continue to be involved in the process of community change, through feeding the hungry, being apart of Kids Kamp to reach out to 20,000 unchurched children, and to continue to assist in the change that is taking place in the communities that have Christ Centrals.)

Applicant's Signature

Hope in our words
Help in our hands

Motivational Statement

Why do you want to intern at CCM? What could you contribute to CCM as an intern? What do you hope to gain from interning at CCM? If you need additional room, attach a separate piece of paper and limit your response to 500 or fewer words.

Applicant's Signature

Hope in our words
Help in our hands

Skills and Experience

Listed below are skills we may find useful and may seek in applicants. Indicate the skill areas in which you have had training experience, including volunteer or community service experience, and indicate how you gained these skills.

Communications Teaching and Tutoring

Organizational Development Community Outreach

Computer Networking Working with Children

Community Organizing Working with Youth

Leadership Public Speaking

Provide any additional skills and or experience that may be helpful in evaluating your application.

Applicant's Signature

**Hope in our words
Help in our hands**

Youth Waiver & Parental Consent Form
Christ Central Ministries

**ASSUMPTION OF RISK, RELEASE OF LIABILITY
and WAIVER OF CLAIMS
INDEMNITY AGREEMENT and PARENTAL
CONSENT**

PLEASE READ CAREFULLY

BY SIGNING THIS FORM YOU MAY GIVE UP CERTAIN LEGAL RIGHTS

CONSENT OF PARENT / GUARDIAN IS REQUIRED FOR PARTICIPANTS WHO ARE NOT 18 OR OLDER

TO: Christ Central Ministries

Please print carefully

NAME OF PARTICIPANT: _____

ADDRESS OF PARTICIPANT: _____

PHONE NUMBER: _____

BIRTH DATE: _____ **HEALTH CARE NUMBER:** _____

FAMILY DOCTOR: _____ **PHONE NO.:** _____

EMERGENCY CONTACT PERSON: _____

RELATIONSHIP: _____ **PHONE NO.:** _____

ALTERNATE CONTACT PERSON: _____

RELATIONSHIP: _____ **PHONE NO.:** _____

HEALTH CONCERNS (Please identify any allergies, health problems, medications, or other health concerns):

DISCLAIMER

Christ Central Ministries and its leaders, directors, officers, employees, contractors, agents, volunteers, members and representatives (collectively referred to as "Christ Central"), are not responsible for any injury, loss or damage of any kind whatsoever sustained by any person or their property while participating in events, activities or travel with the *Christ Central* and all related activities associated with *Christ Central*, including injury, loss or damage.

ASSUMPTION OF RISKS

IN CONSIDERATION OF *Christ Central* allowing me or my child to participate in events, activities, or travel with the *Christ Central* and all related activities associated with the *Christ Central*, including participation in Christ Central Ministries from March 1, *2007* through November 1, *2007* inclusive, and all activities related to Christ Central (collectively referred to as the "Activities"), I acknowledge that I am aware of the possible RISKS, DANGERS AND HAZARDS associated with participation in the Activities including the possible **risk of severe or fatal injury** to myself or others.

These risks include but are not limited to the following:

§ The risks associated with travelling to and from the Activities by means of private or public transportation, which may include but are not limited to a motor vehicle accident resulting in physical injuries or death

§ The possibility of personal injury incurred while using private or public transportation for travel to and from the Activities, including being knocked down or being involved in a physical confrontation whether caused by myself or someone else

§ Medical problems arising before, during or after the Activities

§ Failure to follow the instructions or directions of the persons in charge of the Activities

I, for myself or my child, voluntarily accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, partial or permanent disability, property damage or loss resulting from my or my child's participation in the Activities.

Youth Waiver & Parental Consent Form Christ Central Ministries

RELEASE OF LIABILITY and AGREEMENT

IN CONSIDERATION OF *Christ Central allowing me or my child to participate in the Activities, I agree on behalf of myself and/or my child:

1. **TO ASSUME and ACCEPT ALL RISKS** arising out of, associated with or related to my or my child's participation in the Activities.
2. **TO WAIVE and RELEASE *Christ Central*** from any and all liability for any loss, damage, injury or expense that I or my child may suffer, or that my next of kin may suffer as a result of my or my child's participation in the Activities due to any cause whatsoever.
3. **TO INDEMNIFY and HOLD HARMLESS *Christ Central*** from any and all liability for any damage to the personal property of, or personal injury to, any third party resulting from my or my child's participation in the Activities.
4. **TO INDEMNIFY and HOLD HARMLESS *Christ Central*** from any and all claims, demands, actions and costs for any loss, injury, damage or expense whatsoever that might arise out of my or my child's participation in the Activities.

YOUTH PARTICIPATION CONSENT

Acknowledgment of Participant:

I, the undersigned Participant, understand that I am responsible to act in a safe and responsible fashion, to follow the instructions or directions of the persons in charge of Christ Central, and to obey requests to comply with safety regulations as directed by the persons in charge of Christ Central, including designated leaders and drivers of private or public transportation. I will be solely responsible for myself, will wear a seat-belt when available and will not disturb or distract the driver when using private or public transportation to travel to and from Christ Central activities. At all Christ Central sports events or other activities, I acknowledge that it is my responsibility to obtain and wear appropriate safety equipment. I will not endanger the safety of myself or others at any activities, outings or sports events of Christ Central or when using private or public transportation for travel to and from such activities.

Acknowledgment of Parent or Guardian of Participant:

We, the undersigned Parents or Guardians of the Participant, hereby authorize and consent to the Participant's involvement in Christ Central, including any use of private or public transportation deemed necessary by the persons in charge of the Christ Central for Participant travel to and from Christ Central activities, or to the NEAREST SUITABLE MEDICAL or HOSPITAL FACILITY in the event that emergency or other medical treatment not available at the site of Christ Central activity is deemed advisable. We hereby consent to and authorize such emergency or other medical treatment of the Participant as may be deemed advisable in the event of accident, injury, or illness during the activities of the Youth Group.

ACKNOWLEDGEMENT and SIGNATURE

I UNDERSTAND THAT THIS IS A LEGAL AGREEMENT that is binding upon myself and my heirs, executors, administrators, successors and assigns. **I HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT** and **I ACKNOWLEDGE THAT** by signing this agreement voluntarily, I am agreeing to abide by its terms and I am waiving certain legal rights that I or my child may have.

This Consent, Authorization and Acknowledgment shall be effective from and including March 1, *2007* to and including November 1, *2007*.

Signature of Participant _____ Signature of Parent or Guardian _____
(if Participant is under 18 years of age)

Witness to Signature of Participant _____ Witness to Signature of Parent or Guardian _____

Print Name: _____ Print Name: _____