



**UNIVERSITY OF THE NATIONS**  
B A T T A M B A N G , C A M B O D I A

School of Missions

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Sex: Male Female Martial Status: \_\_\_\_\_ Email: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
(Month) (Day) (Year)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (State) (Country) (Postal Code)

Citizenship: \_\_\_\_\_ Passport #: \_\_\_\_\_

Place Passport issued: \_\_\_\_\_ Date Passport Issued/Expires: \_\_\_\_\_  
/ \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

List of Children (accompanying/not accompanying):

Name	Sex	Birthdate	Birth Place
_____	_____	_____	_____
_____	_____	_____	_____

Nanny: (Must accompany children under the age of 3, separate application is required)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

What school are you applying for : \_\_\_\_\_  
(Name of school) Start Date (month/year)

Person to notify in case of an emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_

Home Church: \_\_\_\_\_ Pastor: \_\_\_\_\_  
\_\_\_\_\_

Applicant's Last Name \_\_\_\_\_

Church/Pastor's Email: \_\_\_\_\_

Criminal Record: (If the answer is yes to either of these questions please explain the details on separate piece of paper.

Have you ever been convicted of a felony? \_\_\_\_\_

Have you ever been convicted of a sexual crime? \_\_\_\_\_

Have you ever received a DUI (Driving Under the Influence)? \_\_\_\_\_

Financial Information:

Do you have the complete school fees?                      Yes    No

Amount you still need: \_\_\_\_\_

From what source will the still-needed funds come? \_\_\_\_\_

Do you have any outstanding debts? \_\_\_\_\_

Languages you can speak (in decreasing order of fluency): \_\_\_\_\_

**Education:**

Name	
Dates	
Academic Field	
Degree/Certificate	

Name	
Dates	
Academic Field	
Degree/Certificate	

**Employment:**

Employer	
Location	
Dates	
Reason Left	

Employer	
Location	
Dates	
Reason Left	

Applicant's Last Name \_\_\_\_\_



# UNIVERSITY OF THE NATIONS

B A T T A M B A N G , C A M B O D I A

## Personal Questions

Please use an additional piece of paper if needed

Explain your decision to follow Jesus and your current relationship with Jesus:

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What is God's calling and vision for your life?

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Explain your relationship with your local church, including areas of ministry, services and leadership experience:

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Describe your relationship with your family. Do they support your desire to attend U of N?

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How did God call you to attend this school?

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Health Form

Vaccinations: The following are the vaccines suggested by many first world nations for travellers to Cambodia. We recommend that you are up to date on all of your needed vaccinations. The asterisk (\*) are STRONGLY recommended.

1. Polio\*
2. Tetanus\*
3. Typhoid\*
4. DP (Diphtheria/Pertussis)\*
5. Hepatitis A and B (please start the course before arriving)\*
6. MMR
7. Rabies
8. Japanese Encephalitis

Personal Health History: Please answer all the questions below. Comment on all answers marked "Yes" in the space provided or a separate piece of paper.

Have you ever had or currently have any of the following:

	Yes	No		Yes	No
Skin Conditions			Hepatitis		
Eye Trouble			IBS/Recurrent Diarrhea		
Ear Trouble			High Blood Pressure		
Head Injury			Low Blood Pressure		
Migraines			Cardiac Dysrhythmias		
Epilepsy			Allergy to: Penicillin		
Fainting Spells			Sulfonamides		
Anxiety			Serum		
Depression			Foods (specify)		
Mental Illness			Arthritis		
Weakness/Fatigue			Back Problems		
Paralysis			Broken Bones		
Insomnia			Diabetes		
Asthma			Kidney Disease		
Surgery			Recurrent UTI		
Appendectomy			Anemia		
Tonsillectomy			Venereal Disease		
Hernia			Tumor/Cancer		
Stomach Ulcer			Female Only:		
Gallbladder Problems			Severe Cramps		
Tuberculosis			Excessive Flow		
Jaundice			Currently Pregnant		
Heart Trouble			Previously Pregnant		

Explanation(s):

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Your current height \_\_\_\_\_ Your current weight \_\_\_\_\_

Are you currently under a Doctor's care for any conditions? \_\_\_\_\_. If yes, please explain:

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If you are taking any type of medication regularly, please name it and list the reason you are taking it:

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How would you describe your overall health?

Poor                      Average                      Very Good                      Excellent

Insurance Information

Name of insurance carrier \_\_\_\_\_ Contact phone \_\_\_\_\_

Policy type \_\_\_\_\_ Policy number \_\_\_\_\_

Expiration date \_\_\_\_\_  
(Day/Month/Year)

Medical Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_  
(Include country code)

Applicant's Last Name \_\_\_\_\_



WAIVER, RELEASE AND INDEMNITY

\_\_\_\_\_, who is herein referred to as the "Releaser", hereby releases, waives and forever discharges the UNIVERSITY OF THE NATIONS, INC., a Cambodian Non-Government Organization, its trustees, directors, officers, agents, employees, if any, successors, insurers and volunteers, who are herein collectively referred to as the "University" from any and all liability, claims, causes of action, loss and damage that may result from any injury to the Releaser's person or property, even injury resulting in death of the Releaser, arising out of the Releaser being a Student, a Mission Builder, and/or a Full Time or Associate Staff member at or of the University, including without limitation of the generality of the foregoing those arising out of or in any way related to the Releaser participating in any University conducted or sponsored program or activity whether on the University Battambang, Cambodia campus, off campus within or outside of Cambodia such as an outreach program, which could be conducted outside of Cambodia.

Releaser hereby acknowledges that if Releaser participates in an outreach program conducted or sponsored by the University or travels internationally on University business that he or she is fully aware of the fact that his or her personal health, freedom, safety and/or life may be at risk of loss or damage from contraction of disease, accidents, terrorism, persecution, war, political unrest and any other number of circumstances that might while traveling internationally or while participating in an outreach program and that the Releaser will give such risks the Releaser's full consideration, prayer and thought in deciding whether or not to participate in any such activity and has given such risks the Releaser's full consideration, prayer and thought in deciding whether or not to sign this instrument and that Releaser has signed this instrument with full knowledge of those risks, voluntarily, and not under any duress or undue influence of whatsoever kind or nature.

Releaser hereby knowingly and voluntarily assumes full responsibility for risk of loss of health, bodily injury, death or damage to Releaser's property arising out of the aforescribed risks, programs and activities. Releaser hereby agrees to indemnify and hold the University harmless from any and all claims, liability, loss, damage, cost and/or expense, including attorneys' fees and costs incurred by the University in defending against any such claims and in enforcing this agreement, that may be asserted against the University or that the University may suffer or incur as the result of Releaser being a Student at the University or being a Mission Builder, and/or a Full Time or Associate Staff member at the University as the case may be.

Releaser expressly agrees that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as possible for any jurisdiction in which any cause of action or claim may arise or be asserted and is being given as an inducement to the University to allow Releaser to be a Student at the University or be a Mission Builder, and/or a Full Time or Associate Staff member at the University, as the case may be, and that if any portion of this agreement is invalid, it is agreed that the balance shall notwithstanding continue in full legal force and effect. This release, waiver and indemnity agreement shall be binding on Releaser and Releaser's heirs, personal representatives, successors and assigns and shall inure to the benefit of the University and its trustees, directors, officers, agents, employees (if any), insurers and volunteers.

RELEASOR ACKNOWLEDGES RELEASOR HAS CAREFULLY READ THIS AGREEMENT, FULLY UNDERSTANDS ITS LEGAL EFFECT AND HAS SIGNED IT OF RELEASOR'S OWN FREE WILL. In witness whereof, Releaser has executed this instrument on this day: \_\_\_\_\_, 20\_\_\_\_.

Releaser's Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_  
Witness Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_



*All of the following policies and agreements need to be signed by the applicant AND a parent or guardian if the applicant is under the age of 18.*

**U of N CAMBODIA BASIC PHILOSOPHY OF MINISTRY**

Thank you for prayerfully considering involvement with YWAM / U of N Cambodia. We would like to take this opportunity to give you some understanding of our calling as a mission in Cambodia. The following serve as basic guidelines for our teams.

**A. WE OPERATE AS A TEAM MINISTRY.** We live together in smaller households, as families and as individuals. We have regular team meetings not only to facilitate communication and logistics, but for teaching, prayer, and spiritual nurture and accountability. Regular participation is expected. We believe that a spirit of accountability welcomes correction, encouragement, and openness in both our corporate and personal lives.

**B. GOD HAS CALLED US AS A MISSION TO PRAY AND INTERCEDE FOR THE NATIONS.** Each ministry team, whether short or long-term, participates in regular times of prayer together.

**C. OUR MISSION FUNCTIONS UNDER AUTHORITY.** In some cases, we work with the local government and therefore submit to their laws, policies, and guidelines. We also cooperate closely with various international agencies and communicate and coordinate accordingly. We affirm our need to be in submission to those whom we serve, those who serve us in the Lord, and those with whom we work as co-laborers.

**D. OUR PRIORITY AS A MISSION IN CAMBODIA IS TO SERVE GOD, EACH OTHER, AND NON-BELIEVERS.** We are dedicated to being relationship-oriented in our living and working together. Our individual relationship with God will affect the way we relate to both fellow staff and non-believers. We desire to minimize the need for structure and rules by leading lives of transparency, humility, open communication and keeping short accounts. People observe how we live and relate together and know we are Christians by our love for one another. We come from many nations, cultures and backgrounds, but our common purpose is to know God and make Him known. Therefore we recognize the importance of developing cultural sensitivity and discovering new ways of accomplishing our goals.

I have read the above and fully accept the guidelines under which we serve together.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**YWAM / U of N CAMBODIA STATEMENT OF BURIAL**

We encourage each prospective staff member to consider seriously the possible consequences of missionary service. Although death is rare in service with Youth With A Mission / U of N, it is nevertheless a possibility.

YWAM/UofN endeavors to protect its staff on the field; however, for those serving in the developing world, it is important to consider the possibility of sickness or death from disease, accident, or other potentially life-threatening situations.

Applicant's Last Name \_\_\_\_\_

When death occurs in a developing nation, the death and disposition of the body are dealt with under the laws of that nation. Some countries require disposal of the body with 24 hours, while others adhere to the religious laws of that nation.

In the case of death, we recommend that burial occur locally rather than returning the body to the home nation. However, should the family desire repatriation of the body and that be possible under local laws and conditions, the family must cover the cost.

For those who see repatriation of the body as a high priority, we recommend you investigate various insurance schemes to cover this event.

*I believe that God has called me into His service with Youth With A Mission/UofN and I feel I must follow Him in obedience.*

*I understand that accidents and sickness are possible wherever I may live and travel.*

*I agree that, in the case of my death while serving with Youth With A Mission/UofN, the disposition of my body may be decided at the location of death. If my family desires to have the body shipped home, and that be possible, I understand that they will need to pay for all expenses incurred.*

I hereby absolve YWAM/UofN and its entire staff and associates from any responsibility for repatriation costs.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### YWAM / U of N CAMBODIA HOSTAGE SITUATIONS

Service in Cambodia, like many other nations, presents the potential danger of staff members being taken hostage.

In principle, YWAM/UofN will not pay ransom to free staff members that are taken hostage. Please sign below indicating that you have read the above statement and are willing to abide by this policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### STATEMENT OF ARMED PROTECTION

Cambodia is a nation which continues to experience armed conflict from time to time. This is a circumstance which all UofN staff and students must take into consideration.

UofN will take all reasonable precaution to ensure that its staff and students are not working in areas of conflict and danger. It is not possible; however, to guarantee complete safety from armed elements while living and/or traveling in Cambodia.

UofN will not expect its staff and students to remain in places where they fear for their safety to the point that they desire to leave, or to travel to or live in places where they would rather not go.

The Royal Government of Cambodia has on occasion wanted YWAM staff to travel with armed guards for their protection. After much consideration, YWAM and U of N International has decided that it is preferable to travel without armed protection from the Government and that we will as individuals accept responsibility for our own safety.

Applicant's Last Name \_\_\_\_\_



Please sign that you have read and agree to this policy.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

U of N CAMBODIA FINANCIAL STATEMENT

I, \_\_\_\_\_, confirm that I am financially able to:  
Purchase a round-trip ticket to and from Cambodia for myself and each member of my family or, upon arrival. Alternatively, I am willing to deposit funds sufficient for return airfare with the organization.

Bring with me or have promise of regular support in the amount of \_\_\_\_\_.

This will cover my commitment to serve in Cambodia for \_\_\_\_\_ months/years.

I also confirm that I have no outstanding debts for which I am responsible. (In the case of other debt, please give detail, including amount and repayment plan.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

U of N CAMBODIA CHILD PROTECTION POLICY

Since Child exploitation is such a big issue in Cambodia we have a Policy which you will read and sign during your orientation. Beforehand we would like to sign the following statement.

Declaration of Commitment/ Statement of no Criminal Conviction

I have not been accused or convicted of any offence involving physical or sexual abuse.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

HEALTH INSURANCE

U of N Cambodia requires foreign staff and volunteers to have overseas health insurance that includes coverage of medical evacuation.

I am insured with the following insurance company \_\_\_\_\_

CONSENT FOR TREATMENT

In case of emergency, I hereby agree to the performance of such treatment, including anesthesia and surgery, as the attending doctor or physician may deem necessary.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

RELEASE OF LIABILITY

I do hereby release University of the Nations Cambodia and Youth with a Mission, its staff, agents and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by myself or my family during the course of involvement with University of the Nations Cambodia.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



Applicant's Last Name \_\_\_\_\_



Personal Character	Not Known	Poor	Below Average	Average	Above Average	Excellent
Self-discipline						
Teachability						
Flexibility						
Perseverance						
Reliability						
Punctuality						
Common sense						
Integrity						
Academic						
Financial responsibility						
Stewardship						
Industriousness						
Response to authority						
Health						

Social Adaptability	Not Known	Poor	Below Average	Average	Above Average	Excellent
Cooperation						
Tactfulness						
Communication skills						
Neatness of person						
Respected by peers						
Positive, contagious spirit						

**Emotional Maturity**

Self-confidence						
Self-esteem						
Ability to deal with stress						
Accurate view of personal strengths/weaknesses						
Ability to deal w/ interpersonal problems						
Overall emotional maturity						

**Leadership Potential**

Initiative						
Willingness to serve						
Decision making ability						
Organizational skills						
Ability to follow						
Ability to motivate others						

Any Additional Comments:

I have known \_\_\_\_\_ for \_\_\_\_\_ years, and believe that he/she possesses the qualities indicated above.

Signature:

Date:

Name:

Position/Relationship to Applicant:

Email:

Evaluator, please email this form to:  
uofnbattambang@yahoo.com

Website: www. uofnbattambang.com  
Phone: +855-12-731-650



**UNIVERSITY OF THE NATIONS**  
B A T T A M B A N G , C A M B O D I A

School of Missions: Pastor or Mentor Reference Form

Applicant: Please fill out your personal information on this form, sign it and give it to your Pastor or

Applicant's Last Name \_\_\_\_\_



	Not Known	Poor	Below Average	Average	Above Average	Excellent
<b>Personal Character</b>						
Self-discipline						
Teachability						
Flexibility						
Perseverance						
Reliability						
Punctuality						
Common sense						
Integrity						
Academic						
Financial responsibility						
Stewardship						
Industriousness						
Response to authority						
Health						

**Emotional Maturity**

	Not Known	Poor	Below Average	Average	Above Average	Excellent
Self-confidence						
Self-esteem						
Ability to deal with stress						
Accurate view of personal strengths/weaknesses						
Ability to deal w/ interpersonal problems						
Overall emotional maturity						

**Spiritual Maturity**

	Not Known	Poor	Below Average	Average	Above Average	Excellent
Knowledge of the Bible						
Consistency of Christian walk						
Able to share Christ with others						
Concern for others						
Assurance of God's calling						
Respects convictions of others						
Overall spiritual maturity						

**Leadership Potential**

	Not Known	Poor	Below Average	Average	Above Average	Excellent
Initiative						
Willingness to serve						
Decision making ability						
Organizational skills						
Ability to follow						
Ability to motivate others						

**Applicant's Giftings**

Please check the appropriate space for each gifting according to your knowledge of the applicant. If you have not observed this trait, check "not known".

	Not Known	Poor	Below Average	Average	Above Average	Excellent
<b>Social Adaptability</b>						
Cooperation						
Tactfulness						
Communication skills						
Neatness of person						
Respected by peers						
Positive, contagious spirit						

	Not Known	Very Apparent	Frequently	Sometimes	Rarely	Never Apparent
<b>Have you noticed these tendencies?</b>						
Critical						
Argumentative						
Domineering Manner						
Procrastination						
Impracticality						
Irritability						
Anxiety/Worry						
Moody						
Dependant relationships						
Homosexual relationships						
Eating disorders						
Behavioral disorders						
Drug abuse						
Close-minded						
Emotional instability						
Flirting						
Sexual immorality						
Easily embarrassed						
Easily discouraged						
Prejudice						
Impatience						
Gives in to peer pressure						
Arrogant						
Frequent exaggeration						
Lack of humor						
Infatuations						
Dishonest or questionable character						
Involvement with the occult						

	Not Known	Poor	Below Average	Average	Above Average	Excellent		Not Known	Poor	Below Average	Average	Above Average	Excellent
Administration							Prayer						
Counseling							Speaking/Teaching						
Hospitality							Working with adults						
Motivating & training others							Working with teens						
Music							Working with children						
One-on-one discipleship							Worship						
Personal evangelism							Other _____						

Any Additional Comments:

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I have known \_\_\_\_\_ for \_\_\_\_\_ years, and believe that he/she possesses the qualities indicated above.

Signature:

Date:

Name:

Position/Relationship to Applicant:

Email:

Evaluator, please email this form to:  
uofnbattambang@yahoo.com

Website: www.uofnbattambang.com  
Phone: +855-12-731-650

Applicant's Last Name \_\_\_\_\_