



# INTERNSHIP



## APPLICATION

Thank you for your interest in the internship program at Cave Spring Baptist Church. The purpose of this internship is to train emerging leaders for the church and world through mentoring, study, and practical ministry. We therefore take seriously the selection process for our interns, whom we view as key leaders in the church. Reflected in this application is our concern for your spiritual commitment, family life, theological acuity, giftedness, and calling to ministry.

We look forward to learning about you and are available to answer any questions you may have about the application process.



### I. PERSONAL INFORMATION

**A. Preliminary information:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

E-mail address \_\_\_\_\_

**B. Family information:**

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

Children: \_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_ \_\_\_\_\_ Age: \_\_\_\_\_



### II. ABOUT YOUR MINISTRY INTEREST AND GIFTEDNESS

**A. Please tell us why you are interested in ministry.**

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**B. How do you hope an internship might serve you in the future?**

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**C. Please describe briefly what you see as your two greatest strengths and your two greatest weaknesses.**

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**D. Do you whole-heartedly subscribe to the Baptist Faith and Message? (yes/no)\_\_\_\_\_. If no, please explain where and for what reason your views differ. (Use attachment if necessary)**

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### **III. CHURCH MEMBERSHIP AND PARTICIPATION**

**A. Of what church are you currently a member?**

Church Name\_\_\_\_\_

Street Address\_\_\_\_\_

City, State, Zip\_\_\_\_\_

Pastor's Name\_\_\_\_\_

Phone Number\_\_\_\_\_

How long have you been a member?\_\_\_\_\_





## IV. REFERENCES AND CERTIFICATIONS

### A. *Personal References*

Please list names, addresses and phone numbers of three people who know you well and who would be willing to provide information about your potential service in ministry. Do not include family members.

Information	Reference 1	Reference 2	Reference 3
Name			
Street Address			
City/State/Zip			
Phone			
Relationship			

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**If you have any questions about this application, please call Chip Baggett (540) 989-6136.**

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Please mail this completed form to:

Internship  
Cave Spring Baptist Church  
4873 Brambleton Avenue  
Roanoke, VA 24018