



395 Wolf Hill Road • Deering, NH • 03244
Phone: (603) 464-5555 • Fax: (603) 464-5658 • www.hismansion.com

INTERNSHIP APPLICATION

PERSONAL INFORMATION

Name _____ Age _____ Date of Birth _____
Current Address _____
City _____ State _____ Zip _____
Primary Phone (_____) _____ Secondary Phone (_____) _____
Permanent (Mailing) Address _____
City _____ State _____ Zip _____ Country _____
E-mail Address _____ Height _____ ft/in Weight _____ lbs
Marital Status ___ Single ___ Engaged ___ Married ___ Widowed ___ Separated ___ Divorced
Do you have children? ___ Yes ___ No
If yes, what are their ages?

Do you have custody? ___ Yes ___ No

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____
Address _____
City _____ State _____ Zip _____
Primary Phone (_____) _____ Secondary Phone (_____) _____
E-mail Address _____

How did you hear about His Mansion?

Who or what was instrumental in your decision to apply to the His Mansion Servant Leader Program?

EDUCATION

List all other high schools, colleges/universities, or graduate schools you have attended.

School Name	Location	Dates Attended	Graduation Date

Degrees: _____

If you left school prematurely, please explain why.

EMPLOYMENT

Are you currently employed? ___ Yes ___ No

a. Employer _____

b. Position _____ Full-Time ___ Part-Time ___

c. Length of Employment _____

d. Supervisor's Name _____

May we contact your employer? ___ Yes ___ No

If not, why? _____

Approximately how many other jobs have you had? _____

Have you served in the military? ___ Yes ___ No

If yes, how long? _____ What branch? _____

Please list previous employment/service experience that would be relevant to your service at His Mansion.

If you have ever had to leave or been asked to leave an employment or service position prematurely, please explain the occurrence in detail on a separate sheet of paper.

CHURCH INFORMATION – Please provide information about your *current* church community.

Church Name _____

Church Denomination _____

Pastor's Name _____

Address _____

City _____ State _____ Zip _____

Primary Phone: (_____) _____ E-mail Address _____

Are you a member? ___ Yes ___ No How long have you attended there? _____ Years _____ Months

Have you discussed your intent to serve at His Mansion with your pastor and/or church leadership?

___ Yes ___ No

May we contact your pastor to discuss your application? ___ Yes ___ No

If not, why?

PERSONAL HEALTH & HISTORY

His Mansion is a community that serves men and women who are working through deep and long-lasting honesty is essential for full relationships. Please answer the following questions. Answering "yes" to any of the following questions will not necessarily disqualify you from service at His Mansion. We respect and value your honesty. Please provide a brief explanation for any item that you check "yes." Feel free to attach a separate sheet to further explain your answers.

Please list and explain any medical conditions or health issues.

Have you received any diagnosis from a mental health professional? ___ Yes ___ No

If yes, what is the diagnosis? _____

Do you take any prescribed medications in accordance with a physician's direction? ___ Yes ___ No

If yes, please list the medication(s) and the dosage(s)?

Is your diet restricted? ___ Yes ___ No

If yes, please explain.

Do you have any allergies (e.g. drug, food, seasonal, animal, etc...)? ___ Yes ___ No

If yes, please explain.

Does anything hinder you from doing physical work, including heavy lifting (e.g. back, neck, knee problems, etc.)?

___ Yes ___ No

If yes, please explain.

Have you ever been charged with or convicted of a criminal act, regardless of whether the conviction was later set aside or expunged? ___ Yes ___ No

If yes, please provide the details of the charge(s) and the outcome – including sentencing, if applicable.

ESSAY QUESTIONS

Please answer the following questions. Your answers will help us get to know you as a person. Please take the appropriate time to reflect and answer these questions on a separate sheet of paper in **no more** than two paragraphs per question. We value your honesty and thoughtfulness.

1. Who are you? How would you describe yourself?
2. How did you come to know God? Describe your relationship with God.
3. In your understanding, what is the Gospel?
4. What do you believe about the Bible? What role does it play in your life?
5. Why do you want to serve at His Mansion? How do you hope to grow by serving at His Mansion?

REFERENCES

Please list three people we may contact for reference and perspective on you as a person. Do not use relatives or close friends. Please use people who know you well and are able to maintain an objective perspective of you, such as pastors, elders, ministry leaders, mentors, teachers, supervisors, etc.

1. Reference One

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Primary Phone (_____) _____ Secondary Phone (_____) _____

E-mail Address _____

2. Reference Two

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Primary Phone (_____) _____ Secondary Phone (_____) _____

E-mail Address _____

3. Reference Three

Name _____ Relationship _____

Address _____

City _____ State _____ Zip _____

Primary Phone (_____) _____ Secondary Phone (_____) _____

E-mail Address _____

Please read the following statement and sign below.

I hereby certify that the answers and other information on this application are true and correct to the best of my knowledge. I understand that any misrepresentation of material(s) or omission of facts on my part will be grounds for the denial of my application and/or dismissal from my service at His Mansion Ministries.

Signature _____ Date _____

PLEASE MAIL YOUR APPLICATION TO:

His Mansion Ministries
395 Wolf Hill Road
Deering, NH 03244

Attn: David McHale, Servant Leader Program Director

A photo must be attached in order for the application to be processed.