



CEF
 CHILD EVANGELISM
 FELLOWSHIP®
 Since 1937 Reaching children worldwide™

Junior Summer Outreach Training Course Application Form

1. Name (block letters) _____

2. Date of birth _____

3. Address _____

Post code _____ Telephone _____

4. Secondary school attended or attending (with years) _____

5. Do you have assurance of your salvation? _____

Based on what Scripture _____

Give a brief account of your conversion _____

6. Which church do you regularly attend? _____

7. Are you in agreement with the CEF Statement of Faith attached? _____
 (Please sign the statement and return it with this form)

8. If accepted, are you willing to keep your denominational doctrines out of your work with CEF? _____

9. Do you believe that children can be converted? _____

10. If there is a high demand for places on the course, preference may be given to those who are able to help with the work of CEF over the months ahead. Do you have any plans to be involved in CEF ministries?

11. Please give the names and full addresses of three persons (other than relatives) of mature Christian experience who are acquainted with you and who would be willing to act as referee for you. (Please include the name of your pastor or minister)

Name (Block letters)	Address (Block letters)	Classification (Pastor etc)
(a) _____	_____	_____
(b) _____	_____	_____
(c) _____	_____	_____

12. Have you had any previous connection with Child Evangelism Fellowship? If so, in what relationship?

13. What other experience have you had in Christian service?

Where? _____

When _____

For how long? _____

14. Are you willing to follow the leadership of those who may be over you in the Lord? _____

15. Do you endeavour with the Lord's help, to show by your behaviour, dress and way of life, that you are a follower of the Lord Jesus? (Remember that children who come under your influence will act as they see you act).

16. Have you answered all the questions on this form? _____

Signature: _____

Date _____

**Please return the completed form along with
the signed statement of faith to your
CEF Local Director or to:**

**Colin Hylands
61 Blackskull Road
Dromore
Co Down
BT25 1JN**