

Application 2017 - 2018

CrossBridge Discipleship School Application

We are so excited you are interested in the CrossBridge Discipleship School! We recognize this application may seem thorough; however, by honestly and completely filling it out you are helping us get to know you and how we can best serve you.

The mission of the CDS is to create an atmosphere for the Holy Spirit to equip you to live a life abandoned to Jesus and to help you discover your God-given purpose. This is an experience built around knowing the person of God, learning His purposes for your life and living in authentic community.

All information given in this application is confidential and will only be read by the CDS staff directly involved in the application process. Male staff will review male applicants and female staff will review female applicants. In regard to the Financial Worksheet, and the Personal Past Reflection Inventory, they are for your benefit and do not need to be returned with the other portions of the application.

Application Instructions:

- Please answer all questions completely and legibly. Use the application form and attach additional sheets to the end of the application as necessary.
- This application may take you a few hours to complete. Start early and turn the application in as soon as possible. Final deadline is May 7, 2017. Late applications may or may not be considered.
- All applications should either be personally turned in at the Information Table before or after Sunday service or mailed to the following address by May 7, 2017. CrossBridge Community Church Attn: CDS Administrator, 25700 Overlook Parkway, San Antonio, TX 78260.
- ✦ Your completed application should include the following items:
 - Application form (Personal Information and Family Background sections)
 - · Brief explanation of why you want to attend the CDS
 - References
- ✦ After your application has been received, you will be contacted within 3 weeks.
- ♦ Once your application has been reviewed an interview will be scheduled.

Requirements

Class Times

- ◆ Tuesdays from 6:00 10:00 p.m. and occasionally on Saturdays 8:30 1:00 p.m.
- There is a tardy/absence policy of no more than 3 tardies and 3 absences per semester.

Schedule and Dates

- CDS is in session from September thru the beginning of June (please make plans accordingly).
- Dates for the fall and spring classes as well as the outreaches, retreats, and holiday schedule will be announced in the acceptance packet.

Out of Class Commitments

- Attending a Sunday service
- ✦ Participation in a Lifegroup
- ✦ Serving at least once a month in a church ministry or ministry team
- Spending time with God by developing a lifestyle of devotion
- Reading Scripture
- Memorizing Scripture verses
- Reading or listening to assigned books (approximately 250 pages per month)
- Sharing the Gospel
- Investing in the spiritual growth of at least one other person
- Attending one class retreat at the beginning of the year and one class retreat in the spring
- ✦ Going on the Reynosa missions trip as a class in the fall (tuition covers cost)
- Joining in a summer international missions trip as a class (raising support is expected)

Passport

✦ Passport that is valid for the next 18 months after the first night of class.

Tuition

- ♦ \$1,100 per person
- ♦ \$400 tuition discount for married couples enrolling together
- Childcare will not be provided, but a childcare subsidy of \$10.00 per hour, will be provided for married couples enrolling together.

If you have any questions about the CDS, or the application process, please contact us at: <u>Discipleship@CrossBridgeCommunityChurch.com</u>.

Personal Information

(Please print legibly)

Full legal name:		
Preferred name	::	
Birth date:	Gender:	
Current Addres	S:	
City/State/Zip:		
Phone: (home)	(cell)	
E-Mail Address	:	
Marital Status:	(fill out all that apply)	
Single	Are you currently dating anyone? Yes / No If so, who?	
Engaged	Fiancé's name and wedding date:	
	Will your fiancé be applying to the CDS? Yes / No	
Married	Spouse's name:	
	Will your spouse be applying to the CDS? Yes/No	
Separated	Date of separation:	
Divorced	Number of divorces and date(s) of divorce:	
□ Widow/er	Date of spouse's death:	
Children's name	e(s) and Birth date(s):	
If you are expec	cting a child, please give the due date:	
Do you have an	ny handicaps or health conditions that require special care? Yes / No	

If so, indicate any limitations it may cause for your involvement in class or missions outreaches (in or outside the country):

Do you have any chronic allergies? Yes / No

Do you have a passport? Yes / No				
Expiration Date:	Passport Number:			
Highest level of Education on beginning date of CDS: (please check only one)				
High school diploma or GED				
Some college	Classification:			
Technical school degree	What major:			
Bachelor's degree	What major:			
Master's degree	What major:			
PhD or professional degree	What subject/degree:			

Signature:	_ Date:
.	

Family Background

For Applicants **UNDER** 20 years of age: (All others skip to "All Applicant" section)

List any siblings you have and their ages: _____

Parent's names: _____

Are your parents Christians and are they currently involved in a church?

What is your relationship with your parents like right now? Please describe it and how they feel about you participating in CDS?

All Applicants:

Describe your family background/upbringing:

At what age did you become a believer? _____

Describe how you began your relationship with Jesus:

What is your religious or denominational background?

Have you ever been involved in the occult, new age practices, or a cult (Mormons, Jeho-vah's Witness, etc.)? Yes / No

If yes, explain:

What is your current church membership:
When did you become a member?
Are you currently a member of CrossBridge Community Church? Yes / No
How did you hear about CDS (i.e. friend, promotional video, etc)?
Have you been water baptized? Yes / No
If yes, Date:
What is your understanding of the "baptism of the Holy Spirit" and your view of the "gifts of the Holy Spirit"? In addition, please comment on your view of their use in the church to- day.
Ministry Interests
Check the one that describes your current serving/leadership responsibilities:
I have never been involved in leading LifeGroups.
I attend a LifeGroup led by:
I am a LifeGroup Leader/Co-Leader:
I regularly serve in the following area(s):
G

Please check the one that most closely describes your long-term ministry interest:

I am interested in working in the secular world. Profession/area: _____

I am interested in church planting/vocational missions. Location/people group: _____

____ I am interested in vocational ministry. Area of ministry: _____

____ Other: _____

Have you taken any mission trips with CrossBridge Community Church? Yes / No

If yes, please list when and where:

Have you taken any mission trips with other organizations? Yes / No

If yes, please list when, where, and with which organizations:

**On the back of this application or on a separate sheet of paper please answer this prompt:

Why I am interested in attending the CrossBridge Discipleship School.**

Please limit your response to no more than one typed page

Personal Financial Information

Tuition for the CDS is \$1,100 per person (and an additional \$700 for a spouse). A deposit of \$250 per person is due (upon your acceptance) by June 25th, 2017. The next payment of \$425 will be due July 30, 2017 with the final payment of \$425 due August 27, 2017. An additional estimated cost for the International Outreach is \$3,000-\$3,500 and must be paid in full before you can go on the overseas trip (please note that you may raise support for this outreach). Except for the missions trip portion funds received for your tuition costs (from you or others) are not tax deductible.

For students to be in a place of freedom to be able to pursue any direction God might lead, it is important that they are fiscally responsible and follow godly principles for handling money. Having debt does not necessarily prevent you from attending CDS. It is important that students not go into further debt, even to attend the CDS. For your own information (not to be turned it with the application) please fill in the debt to income worksheet on the following page and then answer the following questions.

- 1. Do you feel, in good conscious, that you can pay for the CDS without incurring greater debt? Yes / No
- 2. Do you feel your debt to income ratio is being addressed in a way that is leading you to financial freedom, allowing you to pursue God's best for your life? Yes / No

If No, we would like to speak with you further to seek a way that we can work with you in parallel with the school to put you in a place of freedom to pursue God's best.

This page is for you, <u>Not</u> to be turned in with your completed application

Monthly Income and Expenses

GROSS INCOME PER MONTH	8. Enter./Recreation(6%)*
Salary	Eating Out
Interest Dividends	Baby Sitters
Other ()	Activities/Trips
Other ()	Vacation
LESS:	Other ()
1. Tithe	Other ()
2. Tax (Fed., State, FICA)	9. Clothing(5%)*
NET SPENDABLE INCOME	10. Savings (5%)*
3. Housing(36%)*	11. MedicalExpenses(4%)* Doctor
Mortgage (rent)	Destist
Insurance	
Taxes Electricity	Drugs Other ()
Gas	
Water	12. Miscellaneous(5%)* Toiletry/cosmetics
Sanitation	Beauty/barber
Telephone	Laundry/cleaning
Maintenance	All
Other ()	Lunches
Other ()	Subscriptions
4. Food(12%)*	Gifts
	Cash
5. Automobile(s)(12%)*	Cable/Internet
Payments Gas and Oil	Other ()
Insurance	Other ()
License/Taxes	13. School/ChildCare(6%)
Maint./Repair	Tuition
	Materials
6. Insurance (5%)*	Transportation
Life	Day Care
Medical	Other ()
Other ()	14. Investments(5%)
7. Debts(5%)*	
Credit Card	INCOME VERSUS EXPENSES
Loans and Notes	Net Spendable Income
Other ()	Less Expenses
Other ()	

Personal Past Reflection Inventory

This section is for you, <u>Not</u> to be turned in with your completed application

We recognize that a person's past is a very tender subject due to the painful experiences that many have had. However, these past experiences can greatly hinder the Discipleship Process and your own transformation. The inventory that follows is for YOU. It is not something you will be turning in with your application. As you work through the inventory, we encourage you to be extremely honest in your answers in order for you to assess how these issues are affecting you and your relationship with God in the present. A past problem in an area does not necessarily exclude you from CDS. In fact, we all have a past but Jesus wants to redeem our past and give us absolute freedom in every area of our life.

During the interview process one member of the CDS staff, of the same gender as the applicant, will be exploring these areas with you. The topics of the inventory will be explored to the degree that you feel comfortable in order for us to most effectively help you find God's best for your life. In the interview, the information shared will be held in the strictest confidence and will not be recorded.

- 1. Have you used any narcotics, hallucinogens or drugs not prescribed by a physician in the past 2 years?
- 2. Do you currently drink alcoholic beverages? How frequently?
- 3. Do you currently use tobacco products? How frequently?
- 4. What are your thoughts in general on consuming alcohol and tobacco products?
- 5. Would you be willing to abstain from using alcohol and tobacco for the duration of the school?
- 6. Have you been treated for a drug or alcohol problem in the past two years?
- 7. Do you tend to experience strong anxiety, such that it affects your mental state of mind or creates worry and concern that is distracting for you?
- 8. Have you ever struggled with cutting yourself?
- 9. Have you ever struggled with panic attacks?
- 10. Have you ever struggled with suicidal thoughts?

- 11. Have you had any prolonged problems with depression or mood swings in the past two years?
- 12. Have you struggled with an eating disorder (anorexia, bulimia, or excessive or uncontrolled overeating)?
- 13. Have you ever been physically or sexually abused, or raped?
- 14. Have you ever suffered from another type of abuse?
- 15. Have you been the perpetrator of physical or sexual abuse, or rape?
- 16. Have you struggled with episodes of rebellion in the last two years? (specifically defiance of authority figures, not open to accountability, defiance of rules or laws, illegal activities). Have you ever asked yourself or God, why?
- 17. Have you had premarital sex?
- 18. Have you had an extra-marital physical relationship?
- 19. Have you had a homosexual relationship or struggled with same sex attraction?
- 20. Do you have guidelines in place for yourself now, in the area of physical purity to ensure minimal temptation?
- 21. Have you had a relationship in the past two years that would not be considered above reproach (i.e. sexual purity)?
 - A. What does that look like for you?
 - □ Heavy kissing □ Fondling
 - □ Sexual intercourse □ Involvement with a married person
 - B. Singles: Have you dated anyone else since the last occurrence? Do you feel like this relationship is above reproach now?
 - C. Married: Does your spouse know of your infidelity? If your spouse is aware of your infidelity, how is it currently affecting your relationship with your spouse?
- 23. Female: Have you ever had an unmarried pregnancy?

Male: Have you ever been responsible for a woman's unmarried pregnancy?

24. Self Awareness: Do you struggle with any of the following?

Comparison	Insecurity/Low Self-Worth	
Addiction to	Materialism	
Envy/Jealousy	□ Anger	
□ Anxiety	Rebellion	
□ Greed	Fear	
Self-Justification	Control	
Manipulation	Coarse Joking	
□ Lying	Co-dependency	
□ Idolatry	Pride/self-righteousness	
Unforgiveness	Lust (Thoughts, Pornography, etc.)	
Depression	□ Hatred	
Homosexuality	□ Gluttony	
Passivity	Pornography	
Sexual temptation	Masturbation	
Fantasy	Workaholism	

Difficulty applying your purity guidelines or convictions

Take time to reflect on the inventory you have just completed. Seek God with this question: **How have the things of my past influenced my spiritual life?**

Ministry Leader Reference

(someone in a direct spiritual relationship with you such as a Lifegroup leader, ministry team leader or pastor)

I, _____ have applied to be a student in the Cross-

Bridge Discipleship School.

I have referred you to the CrossBridge Discipleship School (CDS) for information concerning my character and fitness for this school. The CDS staff would appreciate your honest, straightforward answers, evaluating both my strengths and weaknesses. CDS standards are high because of the special demands of this school. Thus, the school needs accurate information about me in a variety of areas in order to make a fair appraisal of my character. Your PROMPT COOPERATION in filling out this form will be greatly appreciated. Be assured that your reply will be held in strict confidence and that I will not see this form after you complete it.

Reference Name:	Phone:	

How long have you known the applicant and in what capacity?

How well would you say you know the applicant?

Very well Well Average Not Very Well Almost Not at All

Please discuss the following areas, based on your knowledge of the applicant. If further space is needed, please attach additional sheets.

1. Do you see any indication that the applicant's decision to participate in CDS has been significantly influenced by a desire to escape personal, family or vocational responsibilities? Yes / No

If yes, please explain:

2. Do you believe the applicant has the ability to make decisions and follow through on them? Yes / No

If no, please explain: _____

- 3. How does the applicant respond to authority?
- 4. Can the applicant take responsibility and demonstrate leadership? Yes / No

If no, please explain:_____

- 5. Is the applicant sensitive to the needs, feelings and attitudes of others? Yes / No
- 6. Does the applicant have the ability to work with others? Yes / No

7. How does the applicant respond to difficult circumstances:

**For questions 8-12, If yes, please explain on another page.

- 8. Are you aware of any instance(s) of mental or emotional illness or difficulty that the applicant has had? Yes / No
- 9. To your knowledge, has the applicant ever used narcotics not prescribed by a physician? Yes / No
- 10. Do you have any reservations about the financial integrity of the applicant? Yes / No
- 11. Do you have any concerns about the indebtedness of the applicant? Yes / No
- 12. Do you have reason to question if the applicant has been walking in purity? Yes / No
- 13. What outstanding abilities or talents does the applicant have?
- 14. Please comment on anything else about the applicant you feel would be helpful for us in determining whether or not they are in a good place to commit nine months to intensive spiritual training:

Signature: _____ Date: _____

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Friend Reference

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Reference Name:	Phone:

How long have you known the applicant and in what capacity?_____

How well would you say you know the applicant?

Very well Well Average Not Very Well Almost Not at All

Please discuss the following areas, based on your knowledge of the applicant. If further space is needed, please attach additional sheets.

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If no, please explain: ______

- How does the applicant respond to authority? ______
- 4. Can the applicant take responsibility and demonstrate leadership? Yes / No

If no, please explain:_____

- 5. Is the applicant sensitive to the needs, feelings and attitudes of others? Yes / No
- 6. Does the applicant have the ability to work with others? Yes / No

7. How does the applicant respond to difficult circumstances:

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- 9. To your knowledge, has the applicant ever used narcotics not prescribed by a physician? Yes / No
- 10. Do you have any reservations about the financial integrity of the applicant? Yes / No
- 11. Do you have any concerns about the indebtedness of the applicant? Yes / No
- 12. Do you have reason to question if the applicant has been walking in purity? Yes / No
- 13. What outstanding abilities or talents does the applicant have?
- 14. Please comment on anything else about the applicant you feel would be helpful for us in determining whether or not they are in a good place to commit nine months to intensive spiritual training:

Signature: _____ Date: _____

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