



LAUNCH

EQUIPPING YOUNG ADULTS
TO LIVE ON PURPOSE

46641 Chilliwack Central Road, Chilliwack BC, V2P 1K3
604.792.0694 | office@citylifelaunch.ca | citylifelaunch.ca



Launch
 46641 Chilliwack Central Road
 Chilliwack, BC V2P 1K3
 604.792.0694

APPLICATION FOR ADMISSION

This application is to be completed by the applicant

PLEASE PRINT

NAME

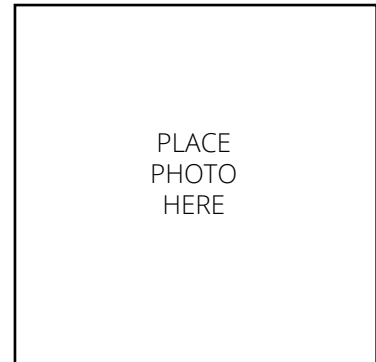
 Last First Middle

PRESENT ADDRESS

 Apt. # Number/Street

 City Prov/State Postal/ZIP Code

 Country Citizenship



CONTACT

(____) _____ (____) _____ _____
 Home Phone Cell Phone Email Address

PERSONAL

 Age Date of Birth (mo/day/yr) Present Occupation

Have you ever been convicted of a felony? Yes No

If so, please explain _____

FAMILY

 Father Mother Guardian (if applicable)

 Father's Occupation Mother's Occupation Guardian's Occupation

Same as home address above: Yes No

If no, please provide below.

 Apt. # Number/Street City

 Prov/State Postal/ZIP Code Country

(____) _____
 Phone Email Address

HIGHSCHOOL

 Highschool Name Location Dates Attended Graduation Date

If you do not have a high school diploma, have you written an equivalency exam (G.E.D.)? Yes No

POST SECONDARY EDUCATION

 Institution Name Location Dates Attended Diplomas/Degrees Earned

 Institution Name Location Dates Attended Diplomas/Degrees Earned

MEDICAL

1. Do you have any physical limitations, learning disabilities or pre-existing medical conditions? Yes No

Please describe _____

2. Are you currently taking any medication? Yes No

Please describe _____

3. Have you ever struggled with psychological problems (anxiety, depression, bipolar, eating disorder, etc.)? Yes No

If so, please provide more details on a separate sheet of paper including a description of the disorder, any medications taken and whether you are currently taking these medications.

4. Do you have any known allergies? Yes No

Please list and describe _____

5. Describe your general health _____

6. Have you ever used drugs non-medically? Yes No Date of last usage _____

7. Have you ever smoked tobacco? Yes No Date of last usage _____

8. Have you ever drank alcoholic beverages? Yes No Date of last usage _____

RELIGIOUS

Home Church _____ Church Phone (____) _____

Church Address _____
Number/Street City

Prov/State Postal/ZIP Code Country

Name of Pastor _____ Denomination _____

Using the fields below, please indicate what kinds of Christian service you have participated in.

		For how long?		For how long?
Preaching	<input type="radio"/>	_____	Worship Leading	<input type="radio"/> _____
Youth Ministry	<input type="radio"/>	_____	Worship Ministry	<input type="radio"/> _____
Children's Ministry	<input type="radio"/>	_____	Choir	<input type="radio"/> _____
Missionary Work	<input type="radio"/>	_____	Other _____	<input type="radio"/> _____
Evangelism	<input type="radio"/>	_____	Other _____	<input type="radio"/> _____

Please read the City Life Church Statement of Faith on the church website (www.citylifechurch.ca).

Do you find yourself in general agreement with our statement of faith? Yes No

If there are areas of disagreement, please describe (use a separate sheet if necessary).

CARPOOL

We may require students with their BC class 5 license (or equivalent) to drive vehicles for carpool purposes.

Do you have your driver's license? Yes No

If yes, what class of license? _____

Students (**Canadian only**) have the option to use their personal vehicle for carpool purposes. Those who agree to do this will receive a deduction of up to \$500.00 from tuition costs. (Please see the *Student Handbook* for more details)

Are you interested in bringing a vehicle for carpooling purposes? Yes No

_____ Make Model Year Number of working seatbelts

I understand that if my vehicle is not selected for the purposes of carpool I will not be receiving the credit for the tuition costs. I also understand that it will be my responsibility to keep my car in working order throughout the year.

Initial: _____

RELATIONSHIP

Launch has a no dating policy for the entire year of training. These guidelines are to protect and strengthen the students' relationship with the Lord and to protect their integrity as disciples. Please read the *Relationship Guidelines* in the *Student Handbook*.

Are you presently dating or romantically interested in someone? Yes No

I have read the Relationship Guidelines in the Student Handbook. Initial: _____

I agree to the no dating policy for the duration of my time as a student in Launch. Initial: _____

FINANCES

List any debts, loans or payments that you presently have _____

Total present indebtedness: _____

Monthly payment _____

Will your debts be paid off by the start of Launch? Yes No

Will you have the total amount of the program's costs by the required date? Yes No

If no, we require that, on a separate sheet of paper, you attach a full payment plan outlining the following:
- Ways you are acquiring funds to pay your tuition (sponsorship, work, donations, bursaries, etc)
- Which dates you will commit to making tuition payments.
- Whether or not you will have the full tuition cost paid before the due date specified in the *Financial Information* sheet.

I understand I will be required to participate in fundraising events held throughout the duration of the program (see the *Financial Information* sheet for more information). Initial: _____

Please sign below that you have read and agree to the terms of the "Financial Information" sheet.

Signature of Applicant Date

Signature of Parent/Guardian (if applicant is a minor) Date

STATEMENT OF INTENT

I, if accepted to Launch, will at all times conduct myself as a Christian, faithfully and diligently apply myself to the studies required by the program, promptly meet all financial and other obligations, and carefully obey the rules and regulations as set forth by the City Life Church leadership and the leadership of Launch.

Signature of Applicant Date

CRIMINAL RECORD CHECK INFORMATION

In order to be legally involved in Launch's weekly community outreaches, applicants will need to send in a criminal record check with their application. When you fill out a criminal record check request form, it will require you to state the purpose of the criminal record check. **The purpose for application is to volunteer with children.**

The specific requirements of these checks differ between Canadian and international applicants. If there are any questions or concerns regarding the process of obtaining and sending a criminal record check, please contact our office and we would be glad to help.

CANADIAN STUDENTS

A Canadian student's criminal record check will need to include a **Vulnerable Sector** check, making it possible to legally volunteer with children in our community.

INTERNATIONAL STUDENTS

International students will need to submit a copy of their State Summary Criminal History from their **home state** (not county or city). It must include an approved **Finger Print Identification Check**. Note that the processing time for these checks can be 8-16 weeks depending on location and will usually require a fee. **You must include a copy of your criminal record check and fingerprinting confirmation in your application.**

Please select one of the following statements:

- I have obtained a copy of my criminal record check and have included it with this application.
- I have obtained a copy of my criminal record check but have not yet sent it to Launch.
- I have not begun the process of obtaining my criminal record check.
- I have not yet obtained my criminal record check, but I have requested one from the appropriate source.

Date you sent the request : _____

IDENTIFICATION

Along with your application, we require you to send a photocopy of your passport, drivers license and medical policy.

DISPUTE RESOLUTION AND DISMISSAL POLICY

The Launch staff is committed to resolving any disputes that may arise with members of the program in a confidential manner. We will consult with students, staff, parents, and houseparents when issues arise. The dismissal policy will come into effect when a student refuses to honour their commitment to the Launch program as outlined in the student handbook.

Our first step will be to address the student one on one. If at this point the student does not show signs of a teachable heart, the leadership of Launch and City Life Church will address the student's attitude and actions. If the student remains unresponsive to correction, dismissal may result. We will, however, give every opportunity for the student to remain in the program. The option of a probation period or suspension may also help to resolve indifferences. Our commitment is to Biblically resolve any problems that may arise.

I have read, understand, and agree to Launch's dispute resolution and dismissal policy.

Signature of Applicant

Date

Signature of Parent or Guardian (if applicable)

Date

FINANCIAL INFORMATION

2018-2019

Semester 1 runs from orientation to the first day of Christmas break. Semester 2 runs from the first day back from Christmas break to graduation.

PAYMENT DETAILS

CANADIAN STUDENTS		
	Cost	Due date
Deposit	\$ 500 CAD	With application
Semester 1	\$ 4500 CAD	Orientation
Semester 2	\$ 1000 CAD	January 3, 2019
TOTAL	\$ 6000 CAD	

INTERNATIONAL STUDENTS		
	Cost	Due date
Deposit	\$ 500 USD	With application
Semester 1	\$ 2750 USD	Prior to entry into Canada
Semester 2	\$ 2750 USD	January 3, 2019
TOTAL	\$ 6000 USD	

Each semester fee is payable on or before orientation.

We accept debit/interac, cash and cheques (Made out to City Life Church) Visa and MasterCard
Please note there is a 4% surcharge on credit card payments.

LATE PAYMENTS

If unable to pay costs due on the required dates, students must submit a detailed payment plan outlined in the Application for Admission. Refusal to do so will result in an inability to join the program.

If a student's tuition is not completely paid before the annual spring tour, they will be unable to participate in this trip.

CARPOOL EXPENSES

Launch will provide transportation to all functions of the program as mentioned in the *Application for Admission*. Carpool expenses, approximately \$60.00 a month, will be collected from all students on a monthly basis.

STUDENT BUDGET

It is our goal to teach young adults how to set and live within a budget. Students are required to limit their spending money for carpool expenses and personal use to a maximum of \$200.00 a month.

FUND-RAISING

The \$6000.00 tuition covers approximately two thirds of a students year. Therefore, Launch has committed to make up for what tuition doesn't cover through fund-raising. Staff and students are required to be involved in fund-raising events held throughout the year.

REFUND POLICY

When Launch enters into a contract with any student, the following refund policy is applicable. This contract becomes active upon the student's acceptance into Launch. Written notice must be provided if the student finds it necessary to withdraw from the program. 100% of the tuition and deposit are refundable prior to Orientation.

If a student chooses to withdraw from the program after it has started, refunds are issued based on the following protocol.

Time Frame	Available Refund (Canadians)	Available Refund (Internationals)
Before Orientation	100% of Deposit 100% of Semester 1 100% of Semester 2	100% of Deposit 100% of Semester 1 100% of Semester 2
Weeks 1-2	80% of Semester 1 100% of Semester 2	60% of Semester 1 100% of Semester 2
Weeks 3-6	60% of Semester 1 100% of Semester 2	40% of Semester 1 100% of Semester 2
Weeks 7-9	40% of Semester 1 100% of Semester 2	0% of Semester 1 100% of Semester 2
Week 10 - End of Semester 1	0% of Semester 1 100% of Semester 2	0% of Semester 1 100% of Semester 2
After start of Semester 2	No Refund Available	No Refund Available

Please keep this sheet for your own personal use.



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APPLICATION CHECKLIST

This checklist is for your own personal use and does not need to be submitted with your application.

The application deadline is July 15. Applications received after that date will be processed on a space available basis. Please send all of the following information to the address provided in the top corner of this page, or email it to office@citylifelaunch.ca

- 1 Application for Admission
Forms
Photo
Signatures (financial agreement, statement of intent, etc)
- 2 Biographical Statement
- 3 Criminal Record Check
- 4 Photocopy of passport
- 5 Photocopy of driver's license
- 6 Photocopy of medical policy
- 7 Parental Reference
- 8 Pastoral Reference
- 9 Personal Reference
- 10 \$500 deposit



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PARENTAL REFERENCE

Name of Applicant _____
Last
First
Middle

Instructions: The person named above is applying for admission to Launch. Because we desire to support the authority of parents in students' lives, we desire your cooperation in completing this form. All information will be held in strict confidence. Your reference, along with other required references, will help us in our decision as to whether to accept this student's application or not (to be filled out if the student is 22 or under).

Family Information

1. Mr. _____ Mrs. _____

2. What relationship does the applicant have to you? Son Daughter Other

If other, please explain relationship _____

3. Has the applicant discussed or consulted with you concerning his/her interest in attending Launch? Yes No

4. Has the applicant had any serious problems in submitting to parental or other authority? Yes No

Comments _____

5. What do you understand to be the motive for the applicant wanting to attend Launch? _____

6. Has the applicant read through and discussed with you the guidelines for their year of Launch? Yes No

7. What was his/her general attitude to these guidelines? _____

8. Understanding our desire that there be no conflict with parental authority, are you supportive of these guidelines? Yes No

Comments _____

Religious Information

Church presently attending _____

Pastor's name _____ Phone (_____) _____

Church Address _____

Approval

Do you fully approve of the applicant coming to Launch? Yes No

Please feel free to add further comments _____

Authorization for Treatment of a Minor

Dear Health Care provider:

If I am unable to be reached to provide consent for medical care, I, the undersigned parent or legal guardian of

a minor, authorize the houseparents designated by Launch or the leadership of Launch to consent in any emergency situation to any medical or surgical procedure or hospital care required for the above minor. Hospital care may include any laboratory tests, X-ray examinations and anaesthetic required. All medical care must be acknowledged as necessary by and performed under the supervision of a physician licensed to practice medicine in the province or nation in which the student lives or to which the student has traveled.

In my absence, my child may be released to the houseparents or leaders designated by Launch following completion of treatment.

Signature _____ Date _____

Mailing Instructions

Mail or deliver this completed form to the applicant in a sealed envelope, being sure to seal and sign the flap. Thank you for your part in this important phase of the applicant's life. NOTE: If you prefer to mail your recommendation directly to us, please feel free to do so. We ask, however, that you notify the applicant of your action and respond promptly to avoid delays in processing the application. Please return this form to:

Launch
c/o City Life Church
46641 Chilliwack Central Road
Chilliwack, BC V2P 1K3 Canada

Questions? Call 604-792-0694



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PASTORAL REFERENCE

Name of Applicant _____
Last First Middle

To the Applicant: Print your name on the line above and give this form to your pastor. If your father is your pastor, please refer the form to another pastor or leader in your church. If a person other than your pastor or assistant pastor completes the form, an explanation from you should be sent to the directors of Launch.

To the Pastor: Each applicant for admission to Launch must submit a recommendation from his or her pastor or substitute as mentioned above. Serious consideration is given to the recommendation, so we request that you complete the form carefully and candidly. Because we expect straightforward comments, we will handle this recommendation with the strictest confidence.

To be completed by the pastor:

1. How long have you known the applicant? _____

How long has he/she been in your church? _____

2. How well do you know him/her?

- Casually - just by name and sight
- Have had few personal contacts
- Fairly well - have had a number of personal contacts
- Have had a very close pastoral relationship

3. To the best of your knowledge has the applicant made a personal commitment to Jesus Christ? Yes No I don't know

Comments _____

4. Select from the following to indicate the extent of the applicant's engagement in your church.

- Is irregular in attendance - little interest in activities
- Seldom participates in activities, although regularly attends
- Is cooperative and usually willing to help in the various activities of the church
- Enthusiastically engages in the activities for his/her age

5. In what forms of Christian service has the applicant been regularly active (Kids Ministry, Youth Group, Worship Team, Choir, etc.)

6. If the applicant does not participate, do you know why? _____

7. In comparison with other young people you know, how would you rate this person in the following areas:

	Superior	Above Average	Average	Below Average
Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loyalty to Church	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Commitment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. In your opinion, does this applicant possess any outstanding abilities? _____ Please describe _____

9. In your estimation, this applicant's spiritual influence on his/her classmates will be... (please circle one)

Strengthening Neutral Adverse I don't know

10. Please circle the terms which best describe the applicant's attitude toward the church and toward the things for which the church stands.

Warmhearted Devoted Enthusiastic Critical Contemptuous
Apathetic Sympathetic Bitter Tolerant Respectful
Rebellious Antagonistic Loving Passive Grateful

Other _____

11. Has the applicant's entire record been such that you would place full confidence in his/her integrity? _____

Comments _____

12. To your knowledge, does the applicant smoke, drink or have they abused drugs? _____

13. Are there personality traits which hinder this applicant in his/her relationship with others? _____

14. Please describe home factors of which you are aware, which might affect the applicant's success at Launch. We are interested in the positive as well as the negative factors. _____

15. Has the applicant discussed with you the concept of a discipleship program? Yes No

Do you fully approve of the applicant coming to Launch? Yes No

Comments _____

Signature _____ Date _____

Print Name _____
Last First Middle

Position _____ Phone (____) _____

Church Name _____

Address _____

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Chilliwack, BC V2P 1K3 Canada

Questions? Call 604-792-0694



PERSONAL REFERENCE

Name of Applicant _____

Last

First

Middle

The person named above is applying for admission to Launch. Your cooperation in completing this Personal Reference form will be greatly appreciated. All information will be held in strict confidence (to be filled out by youth/young adult leader, teacher, counsellor, etc.).

Please check the following:

	Superior	Above Average	Average	Below Average	Inferior
Academic Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative/Motivation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leadership Ability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Adaptability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal Appearance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Moral Standards	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cooperation/Submission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reliability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Response to Correction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1. Do you believe the applicant is a born-again Christian? _____ What evidence have you seen in his/her daily life? _____

2. In what form of Christian work has the applicant engaged, and with what success? Give as full a statement as possible. _____

3. Comment on the family and social background of the applicant. _____

4. To your knowledge does the applicant participate in any of the following? Drug Usage Smoking Drinking

5. Have you had any occasion to question his/her moral character? _____

6. What is the general physical condition of the applicant? _____

7. Does he/she have any mental or physical disabilities? _____

8. To your knowledge, is the applicant prompt in paying debts? _____

9. Has the applicant, in your judgement, fitness and aptitude for a discipleship program? _____

10. In your opinion, is the applicant emotionally stable? _____

11. Would you unhesitatingly recommend the applicant's acceptance to Launch? Yes No

Comments _____

12. These observations are based on an acquaintance over a period of _____ years.

Comments _____

Signature _____ Date _____

Print Name _____

Relationship with applicant _____ Phone (_____) _____

Address _____

Mailing Instructions

Mail or deliver this completed form to the applicant, being sure to seal and sign the flap of your envelope. The applicant has been instructed not to open the envelope, but to forward it to the Launch office with the application materials. The advantage of this system is that the student knows that the application is complete. Thank you for your part in this important phase of the applicant's life. NOTE: If you prefer to mail your recommendation directly to us, please feel free to do so. We ask, however, that you notify the applicant of your action and respond promptly to avoid delays in processing the application and mail the reference promptly to the following address:

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