

XXX 790 - EXPERIENCE IN MISSIONS LEADERSHIP DOCUMENTATION FORM

PLEASE MAKE AND RETAIN A COPY OF THIS FORM FOR YOUR OWN RECORDS!

Credit may be given, upon application to the International Dean of the College/Faculty in which the degree programme is to be granted, for demonstrated past accomplishments on the mission field in YWAM or equivalent missions work. In order to qualify for full XXX 790 credit, you must have accumulated at least 5 years active work on the mission field including at least 3 years in missions leadership. In the mission experience submitted for evaluation, there must have been significant activity and creativity in establishing, developing, or administering a Christian missions thrust, including supervision of co-workers. Credit will be posted on the transcript only if it is the final course requirement for a U of N degree.

Please provide the information requested below for consideration of XXX 790 credit. Each period of service should cover a particular job responsibility which you held during that time period. List your periods of service in chronological order and be sure to indicate whether your involvement was in a leadership role or not. Send the completed form to the leader with whom you worked for the longest time period in order to verify your ministry service. This must include their general evaluation of you as a missionary and leader. The verifying leader may then send this form directly to the appropriate International College/Faculty Dean, so please keep a copy for yourself should the original get lost in transit to or from this leader. A \$25 student registration fee must be received by the appropriate International College/Faculty Dean before the credits given can be posted on the student's transcript.

Student's Name: _____
College/Faculty of Degree Programme: _____

Period of Service #1	Location Name & Address
Beginning -- Ending	_____
Dy/Mn/Yr Dy/Mn/Yr	_____
_____ to _____	_____
Job Responsibility:	_____

Period of Service #2	Location Name & Address
Beginning -- Ending	_____
Dy/Mn/Yr Dy/Mn/Yr	_____
_____ to _____	_____
Job Responsibility:	_____

Period of Service #3 Location Name & Address
 Beginning -- Ending _____
 Dy/Mn/Yr Dy/Mn/Yr _____
 _____ to _____
 Job Responsibility: _____

Period of Service #4 Location Name & Address
 Beginning -- Ending _____
 Dy/Mn/Yr Dy/Mn/Yr _____
 _____ to _____
 Job Responsibility: _____

Period of Service #5 Location Name & Address
 Beginning -- Ending _____
 Dy/Mn/Yr Dy/Mn/Yr _____
 _____ to _____
 Job Responsibility: _____

Period of Service #6 Location Name & Address
 Beginning -- Ending _____
 Dy/Mn/Yr Dy/Mn/Yr _____
 _____ to _____
 Job Responsibility: _____

Period of Service #7 Location Name & Address
 Beginning -- Ending _____
 Dy/Mn/Yr Dy/Mn/Yr _____
 _____ to _____
 Job Responsibility: _____

Period of Service #8 Location Name & Address

Beginning -- Ending _____
Dy/Mn/Yr Dy/Mn/Yr _____
_____ to _____
Job Responsibility: _____

Period of Service #9 Location Name & Address
Beginning -- Ending _____
Dy/Mn/Yr Dy/Mn/Yr _____
_____ to _____
Job Responsibility: _____

Period of Service #10 Location Name & Address
Beginning -- Ending _____
Dy/Mn/Yr Dy/Mn/Yr _____
_____ to _____
Job Responsibility: _____

YWAM LEADER VERIFICATION/EVALUATION

Leader's Name _____ Signature _____ Date _____
Please return to the International College/Faculty Dean at the following address: _____

International College/Faculty Dean's name: _____
Approved _____ Signature _____ Date _____
Number of credits granted _____ Term to which posted _____ Comments _____
