



## We're very excited about your interest in Praxis Nashville!

Please be sure to complete this application fully. It can be filled digitally in Adobe Acrobat, or you can print it, complete it, and scan it in. Ideally, please send completed applications via email to [johnny@glocal-resources.org](mailto:johnny@glocal-resources.org). Otherwise, you can mail applications to:

Praxis Nashville, Glocal Resources  
PO Box 1033  
Hendersonville, TN 37077

### **You must have three confidential references:**

- 1) One from a Campus Ministry Leader or Church staff
- 2) One from another adult who knows you well on a spiritual level
- 3) One from a former/current boss or a professor

The reference form is included in the ZIP file you downloaded, or can be downloaded separately at [glocal-resources.org/praxis](http://glocal-resources.org/praxis).

Applications must be received by March 17, 2023. We will be contacting you no later than March 31, 2023 concerning your status in Praxis Nashville. If you need more details or have questions, feel free to contact me at [johnny@glocal-resources.org](mailto:johnny@glocal-resources.org) or by phone at 814-883-5950.

Adventuring together,

A handwritten signature in black ink that reads "Johnny Pons". The signature is written in a cursive, flowing style.

Johnny Pons

## General Contact Info

Last Name	First Name	Middle Name	Male Female
Do you go by your first name?		Birth Date (mm/dd/yyyy)	Age
yes                  no, you can just call me:			

Current/School Mailing Address	City	State	Zip
Permanent Mailing Address      same as above	City	State	Zip

Email Address	Phone number
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Classification for 2020-2021 School Year	College/University/School	Major
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How did you hear about Praxis Nashville?			
A friend	Campus Ministry	Church	Other:
Name of the church you currently attend:		Do you attend regularly?	
		yes	no
Church Address	Church Phone:		

T-shirt Size
X-Small      Small      Medium      Large      X-Large      XX-Large      XXX-Large

## Emergency Contact

Last Name	First Name	Relationship to You	
Address		State	ZIP
Email Address	Cell Phone number	Alt Phone (work or home)	

## Campus Minister Information

Name	
Phone Number	
Email Address	
Ministry Name	

## Personal Profile

Please indicate your level of experience/confidence in the following:				
Devotional/Time with God	none	very little	moderate	extensive
Evangelism	none	very little	moderate	extensive
Playing an instrument	none	very little	moderate	extensive
Leading worship	none	very little	moderate	extensive
Running a sound system	none	very little	moderate	extensive
Living with roommates	none	very little	moderate	extensive
Healthy conflict resolution	none	very little	moderate	extensive
Other:	none	very little	moderate	extensive

<p>What leadership positions have you held in the past? Explain when and what your responsibilities were.</p>	
<p>Briefly tell us about your past work experience, and about what career field you're planning to enter after graduation.</p>	
<p>Please share how and when you committed your life to Jesus Christ.</p>	
<p>Who has played a key role in your spiritual growth and how have they specifically impacted who you are today?</p>	

<p>Explain (as if you were telling someone with very little church background) how a person comes to faith in Christ.</p>	
<p>Tell us why you want to come to Praxis Nashville this summer. What are your expectations? What do you hope to get from participating in Praxis Nashville?</p>	
<p>Describe your best case scenario of a motivating team experience.</p>	

## Insurance

<p>Do you have health insurance?</p>	<p><b>no</b> <b>yes</b> (if yes, please include an image/scan of your health insurance card along with your application)</p>
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## If selected as a participant in Praxis Nashville 2021, I agree to:

- ☑ Bring the best of my abilities to my work experience.
- ☑ Participate fully in the activities and experiences designed by Praxis Staff.
- ☑ Maintain a Biblical standard of moral and ethical behavior in every aspect of the training experience.
- ☑ Adhere strictly to all COVID guidelines.

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date (mm/dd/yyyy)