



## Born Again Opportunities Program Participant Application

Thank you for your interest in the **Born Again Opportunities Program**. Please complete the application below to be considered for participation in the program.

### Personal Information:

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Address: \_\_\_\_\_
- City/State/Zip Code: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

### Emergency Contact:

- Name: \_\_\_\_\_
- Relationship: \_\_\_\_\_
- Phone Number: \_\_\_\_\_

### Faith & Spiritual Journey:

1. Are you a new believer?  
☐ Yes  
☐ No
2. Have you been baptized?  
☐ Yes  
☐ No
3. Please describe your current faith journey and why you are interested in this program:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Work Experience & Career Goals:

1. Are you currently employed?

☐ Yes

☐ No

If yes, what is your current position?

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2. What are your career goals or areas of interest?

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## Employment Challenges:

1. Have you experienced any difficulties in finding or maintaining employment?

☐ Yes

☐ No

2. Please describe the specific challenges or obstacles you've faced in employment (e.g., legal issues, gaps in employment, lack of skills, discrimination, etc.):

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3. How do you believe this program can help you overcome these employment challenges?

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## Commitment to the Program:

1. This program includes mentorship, professional development, and discipleship sessions. Are you committed to attending all required trainings and sessions?

☐ Yes

☐ No



2. Are you willing to participate in the discipleship sessions focusing on the Book of Matthew?

☐ Yes

☐ No

3. How do you see this program helping you grow personally, professionally, and spiritually?

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**Additional Information:**

1. Do you have access to transportation?

☐ Yes

☐ No

2. Do you have any other commitments (work, school, etc.) that may affect your participation in the program?

☐ Yes

☐ No

If yes, please explain:

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**References:**

1. **Reference 1** (Name/Relationship/Phone Number):

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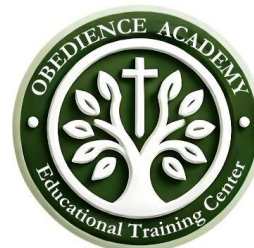
2. **Reference 2** (Name/Relationship/Phone Number):

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# OAETC

OBEDIENCE ACADEMY & EDUCATIONAL TRAINING CENTER



**OAETC**

Obedience Academy & Educational Training Center

## Signature & Agreement

By signing this application, I confirm that the information provided is accurate, and I am committed to participating fully in the Born Again Opportunities Program if accepted.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_