



# **Levitical Trainee Program Application Form**

## **APPLICATION CHECKLIST**

To successfully apply, we need to receive all of these items:

- ☐ Completed application form
- ☐ Separate type-written short answers to the "Questions" section
- ☐ Head-shot
- ☐ Full body photo in a dance pose
- ☐ Audition video (unless you are able to audition in person)
- ☐ Dance resume
- ☐ Costume measurements form
- ☐ Signed Code of Conduct
- ☐ \$30 US application fee (check or money order made out to Arrows International)
- ☐ 3 reference forms (the writers must mail them directly to Arrows International)

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## **SUBMITTING YOUR APPLICATION**

When you have completed your application, please upload everything to ONE folder in Dropbox and share it with [admin@arrowsintl.org](mailto:admin@arrowsintl.org). Then, please print a copy of your completed application form only and mail it with your application fee to the following address:

*Arrows International  
P.O. Box 30101  
Edmond, OK 73003*



## APPLICATION FORM

*Please thoughtfully complete this application form, printing or typing clearly.*

### General Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone (cell): \_\_\_\_\_ Telephone (home): \_\_\_\_\_

Email Address: \_\_\_\_\_

Gender:     M         F                      Marital Status: \_\_\_\_\_

Birth date (MM/DD/YYYY): \_\_\_\_\_ Nationality: \_\_\_\_\_

Passport Number: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_

Languages spoken: \_\_\_\_\_

Have you served with Arrows International before?     YES         NO

If yes, specify:

\_\_\_\_\_

\_\_\_\_\_

### Education

Circle the types of education you have completed:

*High School/GED         Undergraduate         Post-graduate         Vocational School*

If applicable, what is your degree in?

\_\_\_\_\_

\_\_\_\_\_



## Employment History

Name of company: \_\_\_\_\_ Location: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Position held/responsibilities: \_\_\_\_\_

Name of company: \_\_\_\_\_ Location: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Position held/responsibilities: \_\_\_\_\_

Name of company: \_\_\_\_\_ Location: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Dates employed: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Position held/responsibilities: \_\_\_\_\_

## Dance Training

Describe your dance training (number of years, intensity, level, hours of training per week, etc.) in the following styles. Use an extra sheet of paper if necessary.

Ballet: \_\_\_\_\_

Contemporary/Modern: \_\_\_\_\_

Jazz: \_\_\_\_\_

Lyrical: \_\_\_\_\_

Hip-Hop: \_\_\_\_\_

Other (specify): \_\_\_\_\_

\_\_\_\_\_



## Finances

If accepted, who will be responsible for your financial support?

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If accepted, how will you be financially supported during your time in the program (to cover expenses such as tuition, housing, food, etc.)?

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Arrows International's Trainees are responsible for raising their own funds for certain events, travel, and tours. If accepted, how will you fundraise for these events?

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## Home Church

Name: \_\_\_\_\_

Pastor's Name:

\_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Years attending: \_\_\_\_\_ Member: YES NO

## Faith

Are you a born-again believer in Jesus? YES NO



Have you been baptized in water?    YES        NO

Have you been baptized by the Holy Spirit?    YES        NO

How are you involved in your church? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What other ministries are you involved in? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you tithe consistently? \_\_\_\_\_

## **Health**

Please state any long-term illness, injuries or disability: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List current medications: \_\_\_\_\_

Have you ever been diagnosed with depression, anorexia/bulimia, or mental illness?

YES        NO

If yes, provide details: \_\_\_\_\_

\_\_\_\_\_

Do you smoke, drink or use recreational drugs?    YES        NO

If yes, provide details: \_\_\_\_\_



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If yes, are you willing to stop this use during the time you are with Arrows?

YES      NO \_\_\_\_\_

Do you have any visible tattoos?      NO      YES \_\_\_\_\_

Have you ever committed a crime or been convicted of a felony?      YES      NO

If yes, explain:

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### **Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone (cell): \_\_\_\_\_ Telephone (home): \_\_\_\_\_

## **QUESTIONS**

*Please answer the following questions in detailed short answers on a separate type-written paper.*

- ☐ Give a brief description of your walk with the Lord from when you accepted Christ to the present.
- ☐ What are you currently doing to deepen your relationship with the Lord?
- ☐ What are you passionate about?
- ☐ Briefly describe your relationship with your immediate family.
- ☐ Are you currently in a romantic relationship? What are your personal convictions on dating and relationships with the opposite sex?
- ☐ Why do you feel called to Arrows International?
- ☐ What is your ultimate goal as a dancer?
- ☐ What are your expectations for this program?
- ☐ What are three of your strengths and three of your weaknesses?
- ☐ What are some assets you will bring to Arrows International, outside of dance?



- ☐ What is the importance of proper submission to authority and how does it relate to effective ministry?
- ☐ Describe your experiences in leadership.
- ☐ Who has been most influential in forming your identity and how?
- ☐ How do you feel about ministering in other countries, encountering different cultures, adapting to new situations and foods, etc.?

## **Levitical Trainee Program**

### **APPLICATION AGREEMENT**

If accepted, I, \_\_\_\_\_, agree to maintain the highest standards of conduct at all times while I am part of the program. I agree to submit to the godly order and authority of the leaders and staff of Arrows International. I agree to adhere to the code of conduct of Arrows International.

Name (printed): \_\_\_\_\_

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

Date (MM/DD/YYYY): \_\_\_\_\_



## ADDITIONAL APPLICATION INSTRUCTIONS

### Pictures

Submit a head-shot and a full-body shot in a dance pose with the application. For the full-body shot, ladies should wear a black camisole or tank leotard with tights and men should wear a black tank top and black shorts or sweatpants.

### Audition Video

You may audition in person instead of sending a video. If you wish to inquire about such opportunities, email [admin@arrowsintl.org](mailto:admin@arrowsintl.org).

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The audition video must be uploaded to Dropbox in ONE folder with the rest of your application documents and pictures, and then shared with [admin@arrowsintl.org](mailto:admin@arrowsintl.org). The audition video needs to demonstrate your technique in diverse styles of dance. Your video should showcase your strengths; at minimum, it must include the following:

- A three minute solo, demonstrating technique as well as your passion and expression.
- Turning combinations in ballet and jazz styles (both turned in and turned out).
- Jumps/Grand allegro in ballet and jazz. Must include a grand jeté, a leap in second, turning leaps, as well as other leaps of choice.
- At least one combination in every style of dance in which you are proficient.

### References

Arrows International requires three recommendations from:

1. Spiritual Authority or Pastor
2. Dance Teacher
3. Friend

References should be received within one week of your application. The form is found on our website. Please ask each reference to email the completed form directly to Arrows International at [admin@arrowsintl.org](mailto:admin@arrowsintl.org).





## COSTUME MEASUREMENTS FORM

*Provide measurements in inches.*

### **FEMALE**

Height: \_\_\_\_\_

Bust: \_\_\_\_\_

Waist: \_\_\_\_\_

Hips: \_\_\_\_\_

Arm length: \_\_\_\_\_

Shoulder to waist: \_\_\_\_\_

Waist to floor (barefoot): \_\_\_\_\_

Across back at armpit: \_\_\_\_\_

Shirt size: \_\_\_\_\_

Pant size (specify short, long, or regular):

\_\_\_\_\_

Dress size: \_\_\_\_\_

Girth: \_\_\_\_\_

### **MALE**

Height: \_\_\_\_\_

Chest: \_\_\_\_\_

Waist: \_\_\_\_\_

Hips: \_\_\_\_\_

Arm length: \_\_\_\_\_

Shoulder to waist: \_\_\_\_\_

Waist to floor (barefoot): \_\_\_\_\_

Across back at armpit: \_\_\_\_\_

Neck: \_\_\_\_\_

Shirt size: \_\_\_\_\_

Collar: \_\_\_\_\_

Jacket or coat size: \_\_\_\_\_

Pant size (specify waist + length):

\_\_\_\_\_

Girth: \_\_\_\_\_