

KAIROS WORK APPLICATION

Please type or print clearly

Your e-mail: _____

****NAME:** _____

Exactly as it appears on your drivers License/ID Card etc

THIS INFORMATION NEEDED FOR 1ST TIME WORKERS ONLY

****D.L. #:** _____ **** D.O.B.** ____ / ____ / ____ ****S.S.I.#** ____ / ____ / ____

Address: _____ City _____ State _____ Zip _____

Phone: hm# _____ wk# _____ cell# _____

Occupation: _____ Denomination: _____

Full name of Church you attend _____

Address _____

Emmaus/Cursillo you attended: _____ Are you in a Reunion Group _____

Are you in a prayer group? _____ Why do you want to work Kairos? _____

Previous Prison Ministry Experience _____

Who recommended Kairos to you? _____

Because of the nature of the Kairos Candidates, the State & Federal Prison System requires the team to be racially mixed.

Please check one: Am.Indian _____ Hispanic _____ White _____ Black _____ Asian _____ Other _____

Emmaus/Cursillo work experience: _____

Core Team Experience _____

Talks given _____

Leadership Classes attended: _____

Kairos Work Experience: _____

Core Team Experience: _____

Talks given: _____

Attended a Kairos Workshop: (where) _____ (date) _____

What musical instrument do you play? _____ Special education, training, experience which would be helpful in working a Kairos (counselor, musician, theology, etc) _____

****** These items are very important-please be accurate as this information is used to clear you for entry into the prison. Send to "Kairos" PO Box 3304, Clovis, CA 93613