



National Leadership Training

APPLICATION

Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Hmong Name (Nam/Niam): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married

Home Church: \_\_\_\_\_

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

\_\_\_\_\_

List of Ministries Involved: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Sponsorship Approval: \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

\_\_\_\_\_  
Signature of District Director

\_\_\_\_\_  
Date

Comment: \_\_\_\_\_