WEA Leadership Institute

Personal Information

Family Name First Name

Middle Name Date of Birth

Gender Email

Phone Mobile

Skype Country of Citizenship

Marital status

Never Married Divorced

Married Widowed

Separated Remarried

Address

Address

City State/Prov.

Zip/Postal Code Country

Please provide the following information regarding the organization, church or ministry with which you are involved.

Organizational Background

Organization Name

Your Position

Organization Telephone

Organization Website (include http://)

Organization Mailing Address

Evangelical Alliance Background

What is your relationship to the World Evangelical Alliance body? Please use the "Explain" field to clarify.

None

National Alliance/Regional Alliance Leader

National Alliance/Regional Alliance Staff

National Alliance/Regional Alliance Staff Board Member

Commission, Initiative or Task Force staff or leader

Global Partner

Affiliate

Other

Explain:

Do you know or have you ever been a member/associate/participant of the one of the following:

Commissions

Initiatives

Task forces

Educational Background

List all of the diplomas, degrees and certificates you have received starting from most recent and ending with High School:

Most Recent Institution

Institution Name

Address

Telephone

Email

Name the Program of Study

Year Completed

Second Most Recent Institution

Institution Name

Address

Telephone

Email

Name the Program of Study

Year Completed

High School

Institution Name

Address

Telephone

Email

Year Completed

List all not-for-credit courses and programs you have received starting from most recent and ending with High School:

Most Recent Institution

Institution Name

Address

Telephone

Email

Name the Program of Study

Year Completed

Second Most Recent Institution

Institution Name

Address

Telephone

Email

Name the Program of Study

Year Completed

Church Background

Provide the name and contact information for the church you attend (Including name, address, telephone, web and email).

Church Name

Church Website (include http://)

Church Mailing Address

Church Telephone

Church Email

Denominational Affiliation

What is the pastor's or leader's name?

How long have you attended this church?

Describe the kinds of responsibilities you have held in church ministry:

References

Every student is required to receive 2 reference letters in order to be admitted to the WEA-LI. By clicking here you grant the Leadership Institute permission to contact these references.

Authorization:

Yes, I authorize you to contact these references

Please provide the names of three people who can serve as personal references.

Pastor or Church Leader's Name

Pastor or Church Leader's Email

Pastor or Church Leader's Telephone

Pastor or Church Leader's Mailing Address

Work or Ministry Supervisor's Name

Supervisor's Position

Supervisor's Email

Supervisor's Telephone

Supervisor's Mailing Address

Your Story

Tell us why you want to take courses from the WEA?

Tell us how you think the WEA-LI courses can help your National Evangelical Alliance.

Tell us about your spiritual journey.

Enrollment Interests

I want to enroll in...

the Certificate in Association Leadership individual course(s) only

I am most interested in...

Building Strong Partnerships

Association Leadership Essentials - Part 1

Association Leadership Essentials - Part 2

Effective Public Engagement

A Biblical Approach to Public Engagement

The Spirit and Character of Effective Alliance Leaders

Any comments or questions?

Click here to submit the form:

After you click on "Submit", in order to complete the submission of your application, please send an email to weali@worldea.org with your PDF application form attached. Thank you very much.