



# Accelerate Leadership Application

This application for the Accelerate Leadership Program in 2025 should be completed and returned with a copy of the applicant's Working With Children Check to [anyhuis@churchesofchrist.org.au](mailto:anyhuis@churchesofchrist.org.au) by **Friday December 6, 2024**. Once the application has been received, you and other relevant people named on this form, such as your coach or minister, will be contacted for further information and for a phone or in-person interview with a member of CCVT's Leadership Team.

## Applicant Details:

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

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

State: \_\_\_\_\_ Postcode: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Dietary Needs: \_\_\_\_\_

## Church/Agency:

The CCVT church you regularly attend: \_\_\_\_\_

The CCVT church/agency where you will be serving as a leader for at least 8 hours per week: \_\_\_\_\_

Your church minister approving the placement:

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

The leadership role(s) you will be taking on in your church/agency: \_\_\_\_\_

Main coach who will oversee you: \_\_\_\_\_

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

*This person will be contacted in regards to the coaching arrangement, progress, and learning development plan. Content of coaching sessions will remain confidential.*

Name of person to contact regarding details of placement:

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

## Commitment:

I understand that the Accelerate Leadership Program requires attendance at five intensives, scheduled leadership events, completion of an approved learning development plan, and that I am required to abide by the prescribed Code of Conduct.

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Applicant*

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Senior Minister (or delegate)*