

Media Challenge Application Form for 2010:

Return to: Media Challenge PO Box 34345 Indianapolis, IN 46234-0345

Please print neatly!

WORKSHOP PREFERENCE: Please indicate below your preference of dates for attending the Media Challenge Workshop program:

Boise, Idaho July 25-31 International Workshop: (Write in location): _____

GENERAL INFORMATION:

Your Name: _____ Church: _____

Home address: _____ City: _____ State: _____ Zip: _____

Your e-mail: _____ Telephone: _____ Cell: _____

Personal Web site, Facebook, My Space, etc. _____

Parents' Names (Who to contact in case of emergency): _____

Parents' Address (If different than above): _____

ACADEMICS:

Class in School (2010/11): _____ Graduation year: _____ School: _____

Major school interests and activities (academic, sports and extra curricular): _____

Favorite course/sport/activity: _____

SPIRITUAL:

Home Church: _____ City, State _____

Baptized? Yes No Year: _____ Ever attended Church Camp? Yes No Where? _____ CIY? Yes No

Church involvement (list and explain): _____

The Christian life has often been described as a 'spiritual journey' that leads, challenges, shapes and defines us according to God's will in Christ Jesus. Please describe where you are on *your* spiritual journey and how it influences who you are becoming and helps you deal with the circumstances of your everyday life. (Use additional paper as necessary.)

CREATIVE & TECHNICAL:

Please indicate on the scale below how you would describe your creative and technical skill level for each of the following:

	Not good at all			Average				Very good			
	Never done	1	2	3	4	5	6	7	8	9	10
Computer hardware installation and/or troubleshooting											
Working knowledge of software types:											
Word processing											
Spreadsheets											
Database											
PowerPoint											
EasyWorship or SongShow Plus											
Graphics (vector or 3D)											
Page Layout											
HTML / Web design											
Flash movies											
DVD authoring											
Video Editing											
Video Special Effects											
Audio/music editing/sampling/recording											
Live audio/music sound operation											
Photography (digital or film)											
Video camera production											
Video editing/mastering											
Play musical instrument(s)											
Writing/scoring music											
Singing/acting/performing											
Theater set design or construction											
Theater costuming or props											
Theater/event lighting											

Considering all of the above creative and technical skills, please rank the top three in which you consider yourself highly gifted and explain what you have done that sets you apart in these areas.

1. _____ Explain: _____

2. _____ Explain: _____

3. _____ Explain: _____

TEAMWORK:

The *Media Challenge* workshops will involve working together with small teams of 4 to 6 young people who share the work of producing a series of video assignments and programs during the week. This requires that you work well in a group and that your participation allows you to contribute your greatest 'gift' to help the whole team. Please answer the following to help us determine how to best incorporate you into a production team.

Have you served in any leadership capacities either in school, at church, scouts, sports teams or some other organization? Please explain what you did and how well you were able to cooperate and work with others. Also share what struggles or challenges you faced.

Would you consider yourself better at *leading* or *following*? (*Both are needed!*) Explain: _____

Do you work better *alone* or in *groups*? Explain: _____

SAMPLES:

To help us in evaluating your creative abilities, we would like for you to submit something that shows us your potential. This can include something you've written, acted or performed, produced in video, film or music, PowerPoint presentations, Web sites, photographs, or other artistic projects. For a list of suggested items, check out www.mediachallenge.org and look for the *Application Hints* in the Workshop area of the site.

All creative samples need to be labeled neatly with your name and a description of the creative work, clearly stating the role you played in creating the submitted work. If there are any questions regarding creative submissions, write to info@mediachallenge.org and the staff will provide answers as quickly as possible.

We would prefer that you send a copy of your work rather than the original work or master. If you want your sample(s) returned, please include a self-addressed, stamped envelope and we will be sure to get them back to you.

REFERENCES:

Please list at least two references below that we can use in obtaining more information about you. This should include at least one reference who can discuss your creative abilities as well as someone who can be a spiritual reference. We would prefer to have e-mail addresses to contact them, however a current daytime telephone contact is also acceptable. While not necessary for the application process, you can improve your chances of being accepted by having you ask one creative and one spiritual reference to send a letter of recommendation directly to our mailing address.

Creative Reference:

Name: _____ Relationship to Applicant: _____

E-mail: _____ Daytime Telephone: _____

Address: (Optional) _____

Spiritual Reference:

Name: _____ Relationship to Applicant: _____

E-mail: _____ Daytime Telephone: _____

Address: (Optional) _____

Other Reference (Optional)

Name: _____ Relationship to Applicant: _____

E-Mail: _____ Daytime Telephone: _____

Address: (Optional) _____

PERMISSION:

In order to process your application, you must read and sign the application below. For legal reasons, we must also have permission from a parent or guardian. Please have them read and sign the application form below before returning. **UNSIGNED APPLICATIONS WILL NOT BE ACCEPTED!**

Applicant:

I, (print name) _____ hereby attest that the statements made on this application are true and accurate. I further confirm that the creative samples submitted with this application reflect my abilities as labeled and stated and that I am giving a full and honest representation of my own personal work as exhibited in the samples. I understand that all samples will be returned only if accompanied by a self-addressed, stamped envelope.

I further understand that the submission of this application and supporting samples does not assure that I will be chosen to attend the *Media Challenge* workshops, nor that the *Media Challenge* program will be bound to the workshop dates posted in the application materials; *Media Challenge* will convey the dates and locations for all workshops once final selection of attendees is completed and regional responses considered in the final locations chosen for the events.

Furthermore, once notified of selection for the workshop program, applicants will be expected to submit a deposit to confirm their attendance and to hold their spot in the program. (Details will be included in the notification letter.)

Signed: _____ Date: _____

Parent/Guardian:

I, (print name) _____ hereby attest that I am the parent or legal guardian of the above named applicant and that by signing below, I acknowledge that I have read and verify that the information submitted by the applicant in the *Media Challenge* application is true and accurate. I further grant permission for the applicant to submit the information and materials for consideration by the *Media Challenge* staff in choosing suitable candidates for the workshop program, understanding that there is no obligation, stated or implied, on the part of *Media Challenge* to accept the applicant for the workshop program now or in the future. It is further understood that the dates and locations requested on this application may not be available for the applicant but that alternative dates and locations may be offered by *Media Challenge* to suitable candidates who have been selected for future workshop programs.

If selected for attendance at the requested workshop date and location, I understand that further information will be required regarding medical history and insurance coverage for the applicant, and that a medical release will be required for all attendees.

I also understand and grant permission for *Media Challenge*, and its parent organization, Good News Productions, International, Joplin, Missouri USA, to use photographic and video images and other recorded materials from the workshop program, or any and all materials produced by the applicant, whether or not they contain images of the above applicant, in any and all promotional materials or other projects produced after the workshop program.

Signed: _____ Date: _____

For Office Use Only:	Week: _____
Received: _____	Sample(s): _____
Deposit date: _____	Amt: _____ Ck# _____
	Pmt date: _____ Amt: _____ Ck# _____
C: _____	S: _____ O: _____
Comment: _____	
Ref 1: _____	
Ref 2: _____	
Team: _____	
Rm# _____	Med: _____ Other: _____