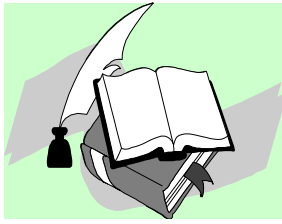


EMMAUS BIBLE SCHOOL  
Statement of Faith

The activities of Emmaus Correspondence School shall be based on the following Statement of faith:

1. The Bible is inspired of God, inerrant in the original documents and of final authority in all matters of faith and practice.
2. There is one God, eternally existent in three Persons--Father, Son and Holy Spirit.
3. The Lord Jesus Christ is fully God, born of a virgin, sinlessly perfect. His sacrifice is sub-stitutionary and representative. He rose bodily from the dead and ascended to His Father's right hand, where He now ministers as our Great High Priest. He will come to rapture His church and subsequently return to reign over the earth.
4. Each member of the human race is fallen, sinful and lost, and regeneration by the Holy Spirit is absolutely essential for the salvation of man. Redemption is wholly by the blood of Christ, and salvation is by grace, through faith in our Lord Jesus Christ.
5. The Holy Spirit indwells the believer who is thus empowered to live a godly life.
6. There will be a resurrection of the saved and of the lost; of the saved unto eternal life, and of all the lost unto eternal and conscious judgment.
7. The Church began with the descent of the Holy Spirit at Pentecost and is composed of all true believers in the Lord Jesus Christ. These believers are united to Him and to one another by the indwelling Spirit. The Church's calling, hope and destiny are heavenly, and its chief functions are to glorify God and to witness for Christ until His return.
8. Christ, our risen Head, is the Giver of gifts, such as evangelists, pastors and teachers, and these men are responsible to Him for their service. They are given "for the perfecting of the saints unto the work of the ministry, for the edifying of the body of Christ."
9. There are two Christian ordinances, baptism and the Lord's Supper. Baptism by immersion signifies that the believer, having died with Christ, is buried with Him in baptism and also is raised with Christ to walk in newness of life. The Lord's Supper is a memorial feast, instituted by the Lord Himself exclusively for His own.
10. Every true child of God possesses eternal life; and being justified, sanctified and sealed with the Holy Spirit, is safe and secure for all eternity.
11. The personal imminent return of the Lord Jesus Christ to translate His Church will be followed by the Tribulation and the inauguration of Christ's reign over the earth He will then deliver up the Kingdom to God, the Father, that the Triune God may be all in all.

- I hereby fully subscribe to the fore going statement of faith.
- Signature \_\_\_\_\_ Date \_\_\_\_\_
- If you do not fully subscribe to this statement of faith, please indicate where and how you differ.



# WRITE-WAY Prison Ministries, Inc.

\_\_\_\_\_  
Branch Address

\_\_\_\_\_  
Branch Telephone Number

\_\_\_\_\_  
Branch No.

## APPLICATION TO BECOME AN ASSOCIATE COUNSELOR

Submission of information does not in itself obligate the applicant to service in the program; neither does it mean that the applicant is automatically accepted as an Associate Counselor. This is a preliminary step in determining God's will.

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE NOS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_ (HOME) \_\_\_\_\_

EMAIL \_\_\_\_\_ (WORK) \_\_\_\_\_

OCCUPATION \_\_\_\_\_ (CELL) \_\_\_\_\_

NAME OF church you attend \_\_\_\_\_

ADDRESS OF CHURCH \_\_\_\_\_

Please explain how you became a Christian. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why do you want to serve in WRITE-WAY Prison Ministries?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you had any special Bible training other than your church program?

\_\_\_\_\_

\_\_\_\_\_

How many hours per week could you spend grading/counseling on exams? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

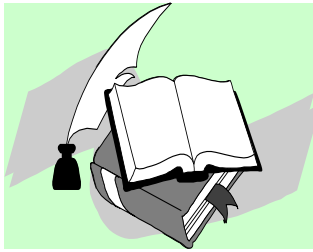
### PASTOR OR ELDER RECOMMENDATION

I believe the above named person will diligently participate in WRITE-WAY Prison Ministries and approve of them doing so.

Pastor or Elder's name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Pastor or Elder's signature \_\_\_\_\_ Date \_\_\_\_\_

Please provide a picture of yourself for reference in the Home Office file.



# WRITE-WAY Prison Ministries, Inc.

PO Box 461582

Garland, Texas, 75046-1582

(972) 840-9798 / (972) 864-9692 fax

writewaypm@verizon.net

Date \_\_\_\_\_

## APPLICATION TO BECOME AN ASSOCIATE INSTRUCTOR

Submission of information does not in itself obligate the applicant to service in the program, neither does it mean the applicant is automatically accepted as a Branch Manager. This is a preliminary step in determining God's will.

Name \_\_\_\_\_ Address \_\_\_\_\_

Residence Telephone \_\_\_\_\_ Office Telephone \_\_\_\_\_

Email address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital status \_\_\_\_\_

Number of Dependents \_\_\_\_\_ Have you ever been divorced? \_\_\_\_\_

Occupation \_\_\_\_\_ Length of Time \_\_\_\_\_

Name of Employer and Address \_\_\_\_\_

Education (brief history) \_\_\_\_\_

Special Interests, Hobbies, Skills \_\_\_\_\_

Foreign Languages \_\_\_\_\_

Name and Address of Church You Attend \_\_\_\_\_

Are you a member? \_\_\_\_\_ Are you active in your local Church? \_\_\_\_\_

If so, please indicate what your involvement is \_\_\_\_\_

Name of Elder or Pastor \_\_\_\_\_ Phone No. \_\_\_\_\_

Explain how you became a Christian \_\_\_\_\_

**Assoc Instr/Br Mgr**

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Have you ever used or been treated for drug and/or alcohol abuse? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Have you ever been incarcerated? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Are you presently on probation or parole? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Have you ever had psychiatric treatment? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Have you had any experience in these areas?

\_\_\_\_\_ Prison Correspondence Work  
\_\_\_\_\_ Prison Visitation

\_\_\_\_\_ Prison Bible Studies  
\_\_\_\_\_ Other

Please explain why you want to become involved in a Prison Correspondence  Course ministry:

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How many hours a week can you spend in this ministry? \_\_\_\_\_

Are you willing to advance the postal fees and other postage until reimbursed by WPM? \_\_\_\_\_

Please give three personal references:

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Assoc Instr/Br Mgr

In applying to serve as an Associate Penal Instructor I agree:

To abide by the general policies of Emmaus Correspondence School.

To abide by the policies and instructions given in the WRITE-WAY Prison Ministries, Inc. (WPM Operations Manual).

To assume full responsibility for the work assigned to me.

To energetically service the institutions assigned to me and to limit my activities to those institutions.

To assure that every person working in my group is in accord with the Emmaus Statement of Faith.

To maintain and see that workers in my group maintain the integrity of the keys as provided by Emmaus Correspondence School through WPM.

To help publicize the work of WPM, and help WPM as much as possible obtain financial support.

I understand this agreement can be terminated by mutual agreement of WPM and myself.

To hand over to WPM or my successor all student files, records, and supplies relative to my operation (for the sake of meaningful continuity) in the event of the ceasing of my involvement for whatever reason.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Note: Please enclose a short biographical sketch and a picture of yourself.

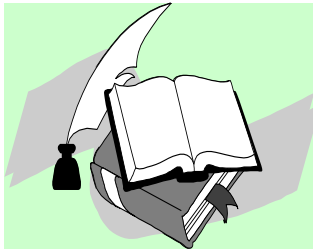
Please sign, date, and return the enclosed Emmaus Statement of Faith with your application.

It is requested that a letter or recommendation from the leadership of your local Church accompany your application.

\_\_\_\_\_  
Approved by the Board of Trustees \_\_\_\_\_  
Date

\_\_\_\_\_  
Signature \_\_\_\_\_ President/Penal Coordinator \_\_\_\_\_  
Date

Assoc Instr/Br Mgr



# WRITE-WAY Prison Ministries, Inc.

PO Box 461582

Garland, Texas, 75046-1582

(972) 840-9798 / (972) 864-9692 fax

writewaypm@verizon.net

Date \_\_\_\_\_

## APPLICATION TO BECOME WPM STAFF

Submission of information does not in itself obligate the applicant to service in the program, neither does it mean the applicant is automatically accepted as staff. This is a preliminary step in determining God's will.

Name \_\_\_\_\_ Address \_\_\_\_\_

Residence Telephone \_\_\_\_\_ Office Telephone \_\_\_\_\_

Email address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Marital status \_\_\_\_\_

Number of Dependents \_\_\_\_\_ Have you ever been divorced? \_\_\_\_\_

Occupation \_\_\_\_\_ Length of Time \_\_\_\_\_

Name of Employer and Address \_\_\_\_\_

Education (brief history) \_\_\_\_\_

Special Interests, Hobbies, Skills \_\_\_\_\_

Foreign Languages \_\_\_\_\_

Name and Address of Church You Attend \_\_\_\_\_

Are you a member? \_\_\_\_\_ Are you active in your local Church? \_\_\_\_\_

If so, please indicate what your involvement is \_\_\_\_\_

Name of Elder or Pastor \_\_\_\_\_ Phone No. \_\_\_\_\_

Explain how you became a Christian \_\_\_\_\_

**Staff Application**

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Have you ever used or been treated for drug and/or alcohol abuse? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Have you ever been incarcerated? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Are you presently on probation or parole? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Have you ever had psychiatric treatment? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Have you had any experience in these areas?

\_\_\_\_\_ Prison Correspondence Work  
\_\_\_\_\_ Prison Visitation

\_\_\_\_\_ Prison Bible Studies  
\_\_\_\_\_ Other

Please explain why you want to become involved in a Prison Correspondence  Course ministry:

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How many hours a week can you spend in this ministry? \_\_\_\_\_

Please give three personal references:

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

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In applying to serve as a WPM Staff I agree:

To abide by the general policies of Emmaus Correspondence School.

To abide by the policies and instructions given in the WRITE-WAY Prison Ministries, Inc. (WPM Operations Manual).

To assume full responsibility for the work assigned to me.

To assure that every person working in my group is in accord with the Emmaus Statement of Faith.

To maintain and see that workers in my group maintain the integrity of the keys as provided by Emmaus Correspondence School through WPM.

To help publicize the work of WPM, and help WPM as much as possible obtain financial support.

I understand this agreement can be terminated by mutual agreement of WPM and myself.

To hand over to WPM or my successor all student files, records, and supplies relative to my operation (for the sake of meaningful continuity) in the event of the ceasing of my involvement for whatever reason.

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Signature

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Date

Note: Please enclose a short biographical sketch and a picture of yourself.

Please sign, date, and return the enclosed Emmaus Statement of Faith with your application.

It is requested that a letter or recommendation from the leadership of your local Church accompany your application.

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