



2022 KC Living Waters Leadership Training Application

Applicant Information

First Name: _____ Last Name: _____

Age: _____ Gender: _____

Marital status: _____ Number of Children: _____

Phone Number: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____

Occupation: _____

Preferred accommodations:

- Shared (\$1,099.00)* *Private (\$1,399.00)*

Section A:

Personal and Group Information

What are the main reasons you want to attend this training?

Have you ever been through a Desert Stream Ministries training or a Living Waters program in a local church/parish?

- Yes No

If yes, when and where? Who was the coordinator?

What specific areas of support/healing do you desire (check all that apply)?

- Addiction to pornography/fantasy, etc. Sexual abuse
 Same-sex attraction Marital struggles Gender Dysphoria
 Illicit sexual behaviors Codependency Other (provide details below)
 Struggles in my celibate commitment (seminary life/priesthood/consecrated religious etc.)

Please submit to dgreer@desertstream.org or mail to:
Desert Stream Ministries, 706 Main St., Grandview, MO 64030.
For more information, call 816-767-1730.

Additional Information:

Are you applying with any others (e.g. spouse, friend, church member)? If yes, what are their names?

Church Affiliation

I am (Catholic, Protestant, etc.): _____

At what point of your life did you consider yourself a Christian?

Current Church: _____

Name of pastor/leader overseeing program: _____

Church location (city/state): _____

Do you attend weekly?

Yes No

How long have you been a member of this church? _____

In what capacities are you involved?

Does this church currently have a Living Waters group running?

Yes No

If yes, who is the coordinator? _____

If no, do you hope to start a Living Waters/Cross Current group at this church?

Yes No

If planning to join/start a Living Waters group, in what position of leadership do you desire to serve?

- Coordinator Small group leader Assistant small group leader
- Intercessor Pastoral overseer
- I am not interested in a leadership position at this time

How do you feel about giving and receiving prayer in a group setting?

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Do you consider yourself charismatic in terms of today's expression of the spiritual gifts found in 1 Corinthians 12:7-11?

- Yes No

Please list your past church affiliation(s) or religious instruction beginning in childhood:

Is the program, or will it be, affiliated with a separate (non church-based) ministry?

- Yes No

If "Yes" please continue to Section B, if "No" please skip to Section C.

Section B:

Ministry Name

Ministry location (city/state): _____

Will the program be, or is it currently, run at this location?

- Yes No

How long have you been involved with this ministry, and in what capacity?

Section C:

Please briefly describe your educational history:

Please describe any current struggles causing you distress:

Please describe any significant traumatic events in your life:

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Are you currently on any medication?

Yes No

If yes, please explain the medication and situation:

Have you ever been hospitalized?

Yes No

If yes, please explain why you were hospitalized:

Have you ever been convicted of a felony?

Yes No

If yes, please explain the felony:

Please describe any chemical dependencies in your family:

Please describe your first sexual experience and your age at the time:

Please describe the most pressing sexual and/or relational problems you are facing now:

Have you ever been involved in a long-term sexual relationship (heterosexual or homosexual) outside of marriage?

Yes No

If yes, please note approximate dates and length of relationship:

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Please describe your moral positions on sexuality, i.e., the parameters of sexual expression. Including your views on LGBTQ+ tendencies and practice:

What resources do you have for personal accountability, oversight, and ongoing healing and growth in your own life?

How do you feel about participating in a group that includes persons of varying traditions, including Protestant and Catholic?

Please describe any help you are currently receiving from a healing ministry or support group, including any history with Living Waters:

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