

We are happy to announce that STF Europe will re-open! Register Now!

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We are happy to announce that the STF Europe programme will re-open!

The upcoming STF year will begin on 18th January and end on 1st August 2021. The home-base will continue to be the beautiful location of Głanów, Poland and the STF Europe staff is already making preparations to make this year a very meaningful one, centered on our Heavenly Parent and True Parents.

A series of short videos are being posted to the [STF Europe Facebook page](#), in which some STF graduates will be sharing their experiences with Heavenly Parent and True Parents while being in the programme.

You can find the application form on the [STF Europe Facebook page](#) or on the website:

[Register Here](#)

The STF fee for the year 2021 will be 700 euros.

For any questions, please don't hesitate to contact us: europeanstf@gmail.com



REGISTRATION

STF Europe Registration

Registration for STF Europe 2020 – 2021 is open!

If you are interested in joining us, please follow the link and fill out the form. Once you have completed the form, wait for an email of response from our staff.

We're ready to welcome you!

IMPORTANT NOTE

Due to the current circumstances related to the COVID-19 emergency, the STF staff is planning to reopen the STF program in January 2021. Therefore the STF year will be running from mid-January until August.

We ask for your understanding in the eventuality that this plan will have to change again if future circumstances will not allow this possibility.

Deadline for NON-European participants – [31st October](#)

Deadline for European participants – [31st December](#)

Application for a participant: <https://form.jotform.com/200222629981353>

Application for parents of the participant: <https://form.jotform.com/200222015374338>

If you'd like to receive more information about us, visit our [Facebook page](#)





STF EUROPE Application Form 2020-2021

CHECK-LIST: *

Please upload your recent picture *

No file selected



We require letter of recommendation from your Church or Youth leader, please give us his/her email address:

example@example.com

PERSONAL INFORMATION

First name *

Middle Name

Last Name *

Gender *

Date of Birth *

 / /

Month

Day

Year

Home Address (Street) *

Post Code *

City *

Country *

Home Phone *

Mobile Phone *

Email *

T-shirt Size for Your Gender *

Are you matched? *

- yes
 no

Are you blessed? *

- yes
 no

(If Blessed) Blessing Year

You are

- 1st Generation
 2nd Generation
 3rd Generation
 Jacob's Child

If 1st gen, how many years have you been a member?

How did you find out about STF?

PARENTS' INFORMATION

Father's Full Name *

Father's phone number *

Father's email *

Mother's Full Name *

Mother's phone number *

Mother's email *

Home Address (if different from above)

Blessing Year *

HEALTH INSURANCE INFORMATION

In case you won't have the possibility to have a valid health insurance, you will be held responsible for all costs related to your medical care (hospital, injuries, specific medications). STF will provide general medications for flu, fever, etc and basic first aid.

I will bring to STF *

- European Health Insurance Card E111
- Private Health Insurance
- I don't know

Insurance expiry date

Insurance contact tel. nr.

What is insured according to your insurance? (in few words)

Please upload picture of your insurance contract or card *

PASSPORT INFORMATION

Full Passport Name *

Country of Citizenship *

Country of Citizenship *

Passport Number *

SIBLINGS' INFORMATION

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

Name

Year of Birth

Years in STF (if any)

HEALTH INFORMATION

If it is not applicable please put N/A

What kind of sports/exercises have you done during high school? *

Please explain if you have any concerns and why (previous injuries, surgeries, family history, mental illness, etc.): *

Have you ever experienced spiritual related difficulties? If yes, to what extent? *

Flat feet: *

Knee problems: *

Back/Neck problems: *

Scoliosis: *

Asthma: *

Food restrictions *

Allergies *

Please explain in detail any short or long-term special needs other than above: *

MORE PERSONAL INFORMATION

1. What kind of church-related activities have you been involved in during your high school years? (Witnessing or visiting churches with parents, leading youth ministry, work with HARP, staff at workshops, service activities, etc.) *

2. What kind of work experiences have you had, if any? Please describe the nature of your employment and how long you worked. *

3. What kind of extra-curricular activities (sports, music, school clubs, volunteer work, etc.) have you been involved in during your high school years? Please describe if you have received any awards or held any positions. *

4. What did you do in the time period between high school graduation and applying to STF? *

5. Describe your main skills, hobbies, and interests. *

6. What are you planning to do after STF? *

7. Please, share freely any additional information you would like the STF staff to know about you, besides points mentioned above.

ESSAY QUESTIONNAIRE FOR APPLICANTS

We would like to ask you to elaborate on why you want to be a part of the STF program and what your expectations are.

We encourage you to be honest with the essay as this will help us to understand your present situation better and how to improve the application process in the future.

Please cover the following points in your essay:

- What has led you to make your decision to apply to STF? Please include any important background information that may have influenced your decision.
- What do you hope to gain from your participation?
- How do you plan to contribute to the Family Federation as a result of your STF experience?

The essay should contain a minimum of 200 and a maximum of 500 words

Please fill out the text area below.

*

QUESTIONNAIRE FOR PARENTS

Please ask your parents to answer the questions in another form: <https://form.jotform.com/200222015374338>

STF CODE OF CONDUCT

1. I want to participate in the Special Task Force – a one-year full-time mission program specifically designed for young adults of the Family Federation.
2. I pledge to sincerely do my best to build a strong relationship with God and True Parents during my time on this program.
3. I pledge to follow the schedule and the directions of the organizers and staff for the whole duration of STF.
4. I pledge to not engage in exclusive male-female relationships or to create an environment that is in any way a distraction to others.
5. I pledge to not smoke, consume alcoholic beverages or illegal drugs/ substances.
6. I pledge to never misuse public money during the entire duration of the STF program. I am aware that the result of the fund raising activities has to be offered fully to the team leader at the end of the day.

The STF code of conduct is intended to set a new standard for your life on STF and after. Please note that your past actions will not be taken into account in terms of acceptance, but rather your investment in the program.

Any violation of the STF code of conduct will lead to the following consequences:

- 1st warning: verbal warning/ STF staff call your parents
- 2nd warning: you may be suspended from the STF program for a short period
- 3rd warning: you may be required to permanently leave the STF program

By signing this document, I agree to upkeep the STF code of conduct and I acknowledge the consequences of any violation of the STF rules/ guidelines.

*

I have completed the application form, read the above information and made my own decision to apply for STF

Participant's Signature *

Clear

*

As parents we fully support our child's decision to participate in STF

Parents' Signature *

Clear

*

I agree that photos, videos with my image taken during my participation on STF can be shared publicly by STF

*

By signing this application and attending our program, you acknowledge that we will not be liable to you in respect of any injury inflicted by yourself (including without limitation serious injury or death) that you may suffer or sustain directly or indirectly as a result of attending our program. Nor will we be liable to you in respect of any other losses arising as a result of any such personal injury. Nothing in this disclaimer shall: limit or exclude our liability for death or personal injury resulting from negligence; limit or exclude our liability for fraud or fraudulent misrepresentation.

*

I understand that if I do not have a EU citizenship , in order to participate in the STF program I am obligated to apply for a VISA permission to stay in Europe for one year. The costs of the VISA application have to be covered by the participant. You will be guided through the process by the STF staff once your application is well received.

*

I understand that the fee for STF Europe is 700€

Enter the message as it's shown *

In case of any questions, please contact us through the following e-mails:

stfwsreg@gmail.com

europeanstf@gmail.com

Submit

STF EUROPE QUESTIONNAIRE FOR PARENTS

Dear parents,

your son/ daughter is applying to STF Europe program.

We would like to ask you to write about your child here in this form as any information can help us to set the proper environment for every participant of our program.

Disclaimer

We believe it is crucial for parents of applicants to be aware of the **physical intensity of STF Europe**. Please take into consideration that knee, ankle and back pain will greatly limit your child from participating to parts of the program. We strongly encourage you to treat any kind of physical difficulty before the program starts.

Please be aware that STF Europe is also a **spiritually challenging environment** as well. Participants may experience difficulties if spiritually sensitive.

Your name *

Your email *

example@example.com

Your sons/daughter's name *

Could you describe how you have supported your son/daughter's spiritual life? (e.g. family HDH, DP study, workshops, etc.) *

Describe your son/daughter's strengths/good qualities *

Describe your son/daughter's weaknesses/areas needing improvement *

Describe your son/daughter's relationship with peers and Blessed Children in your local community *

Are there any specific problems which we need to be aware of when supporting your son/daughter? (Particularly health issues that may affect their well-being like mental issues or past traumas or serious surgeries) *

What do you expect to be the outcome of your son/daughter's time on the STF program? *

Please inform us if there are any occasions for which your child needs to return during his/ her stay in our program.

*

- I understand that the STF Europe fee is 1000 euros
- I understand that if my son/daughter is not a EU citizen, he/she will be asked to apply for a VISA for the entire duration of the program. The costs related to the application to obtain the VISA has to be covered by the participant. The STF staff will guide the future participant through the VISA application once the STF application is well received.