

6th 400 Million Blessing 2nd Generation Candidate's Application

Photo	1) Name: Family	Given	Middle
	2) Mission Country:		3) Nationality:
	4) Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	5) Date of Birth: Year Month Day / /	6) Parents : Blessing Group: Couples Father's Name: Mother's Name:
7) Academic Background Code:	8) Height: Cm	9) Weight: Kg	10) Blood Type:
11) Local Church Location:		12) Local Church Tel. No.:	
13) Personal Tel. No.:		14) Mission or Occupation:	
15) Divine Principle Education: (Longest Workshop Completed) days Date/Venue:			
16) Health: Describe in detail any serious health problem or physical disability (serious illness, venereal disease, hereditary disease, infertility, physical handicap or other abnormality). If necessary, please use a separate sheet of paper.			
17) National leader or Church Leader's Remarks (regarding 7-day fasting condition the applicant's life of faith, activities etc.) :			
18) Additional Documentation: (Submit to Seoul Blessing Committee)			
1. Certificate of Eligibility for Marriage			
2. Health Certificate (including AIDS test result)			
3. Graduation certificate from highest academic level achieved			
4. Photographs: two, 20 x 25 cm; one of head and shoulders, one full figure; taken indoors, plain background; one passport photo			

Pledge of Faith: I profess my faith in God and True Parents and pledge to uphold the traditions they have bequeathed. I wish to participate in the 2nd 400 Million Blessing Couples - Second Generation Blessing.

I certify that the information in this application is true.

Date: _____

Signature of Blessing Applicant:

Signature of Parent:

National Leader's Confirmation of Applicant's Sexual Purity:

Recommendation of Local Church Leader (Signature):

Recommendation of National or Regional Leader (Signature):
