



## CPYR SIMILAR MINISTRY APPLICATION

The pillar of Crystal Peaks' *Empower the Ministry* exists to help support those who have a similar heart to join in the ministry of serving kids and their families. From the very early years of CPYR, it has been our desire to shoulder alongside like-minded Believers in their vision to reach others for Christ using the tool of a horse.

Our love for God and the incomparable blessing of His love for us is the foundation that inspires Crystal Peaks to work together in bringing the Gospel of Jesus to the world around us. This is the tie that binds us together. We are also deeply moved by the unique and creative ways the Lord has called each of us to ranch ministry. Because of this individuality, no two ministries will resemble another, and this brings us so much joy. Colossians 3:17 states, "And whatever you do, in word or deed, do everything in the name of the Lord Jesus, giving thanks to God the Father through Him." Having continually worked in ministry since 1995, we are constantly blessed to witness the beautiful and simple ways Jesus uses the horse and Ranch to bring His love, hope, healing and redemption to the children and families that call Crystal Peaks their home.

Thank you for your desire to become a similar ministry alongside Crystal Peaks. Please take time to read and pray over the seven key statements below and consider if they are an accurate representation of the foundation, vision and trajectory of your ministry.

1. I desire to unite with the Crystal Peaks Similar Ministry team in sharing the redemptive love of Jesus Christ.
2. We utilize equine ministry as the primary means through which the love, hope, healing and redemption of Jesus is shared.
3. I agree with Crystal Peak's mission Statement of Faith (*printed below*) because it aligns with the Great Commission.

*Crystal Peaks Youth Ranch is a faith-based ministry organization. The Founders, Board of Directors and staff of Crystal Peaks Youth Ranch believe that Jesus Christ is the one and only Son of God, He is our Savior, our Redeemer, and coming King. We believe the Bible is the breathed Word of God, perfect in every word and without error. It is our greatest desire to serve the Father by the demonstration of our faith through action. Faith on the ranch is expressed through "living example" to those we work with.*

*It is our highest honor to serve children and families of all backgrounds with the same loving grace that has so freely been given to us. As a result of this foundation, all of our programs and training are structured accordingly.*

4. I have attended a Crystal Peaks' IGNITION/Information Clinic.
5. By daily pursuing the leadership of Jesus through God's Word, worship and prayer, I have fashioned my ranch ministry to be uniquely centered on His loving redemption.
6. I agree that all aspects of our ministry will respectfully point to the saving grace of Jesus Christ, not any program, technique or living thing.
7. I agree to shoulder with Crystal Peaks each year through their annual update.

If these statements parallel the vision of your ranch ministry—and you agree—please initial here. \_\_\_\_\_

For those who might have questions about your organization potentially meeting the requirements of becoming a similar ministry of CPYR, please; contact us before continuing any further with this document. We would welcome clarifying discussion and any other way we can be a support to you.

*You can contact us by emailing: [similarministries@cpyr.org](mailto:similarministries@cpyr.org) or calling 541-330-0123.  
Our regular office hours at Crystal Peaks are 9am - 6pm (Pacific), Monday - Thursday.*



Know that the following application is intended to provide a baseline of information for further conversation. This gives us insight into the uniqueness and the hope of your program. We ask that only ministry founders fill out this application, as this is who we will contact once reviewed.

Please do not be daunted by the questions. If some inquiries are in areas you haven't developed or considered yet, we ask that you answer to the best of your abilities and goals for the coming year. The application is extensive and requires some thought, so please set aside enough time to thoughtfully and accurately complete.

We also require that you submit two letters of reference. We would like to see one reference from an individual whom you have served under (board member, pastor or employer) and the second from someone within the ministry (leader, volunteer or session child parent). These letters need to be submitted with the application. Please upload letters of recommendation before moving forward in the application process. As requested above, please submit your two reference letters:

\*Letter 1 Submitted by: \_\_\_\_\_

\*Letter 2 Submitted by: \_\_\_\_\_

Once we receive your application, we will contact you and set up a phone review.

## MINISTRY INFORMATION

Ministry Name (Include other names used if applicable):

Name of individual filling out form: \_\_\_\_\_

Founded by (please list all applicable names):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Are the founders still active in the ministry? If so, what roles do they play?

Date ministry was founded: \_\_\_\_\_

Year Non-Profit status obtained - if applicable: \_\_\_\_\_ Tax ID # (EIN): \_\_\_\_\_

Does your ministry have their 501-c3 status? If not, where are you in this process?

Is your organization affiliated with another church, organization or denomination?

Please share your ministry's mission statement:



In two or three paragraphs please describe how your ministry came into existence, the testimony of your ranch.

Describe your current program in one to two paragraphs.

Please share what Bible verses, if any, are a signature part of your ministry and why?



## MINISTRY CONTACT INFORMATION

Once your organization is accepted as a CPYR Similar Ministry, we will use the information given in this section on our website as a part of our Similar Ministries Finder.

Ministry's Primary Contact Name(s) and Title(s): \_\_\_\_\_

Ministry's Primary Contact Phone Number: \_\_\_\_\_

Ministry's Email address: \_\_\_\_\_

Ministry's Mailing Address: \_\_\_\_\_

Ministry's Physical Address (if different from mailing address): \_\_\_\_\_

\_\_\_\_\_

County (or Providence): \_\_\_\_\_

Website URL: \_\_\_\_\_

Facebook Page/Instagram (or any other social media account) or ID used by the ministry:

\_\_\_\_\_

I give permission for the above contact information to be published and shared by CPYR. I understand this is not an endorsement of our organization. I agree to notify CPYR if this information is changed. I understand that I must complete an Annual Update each year with CPYR to remain in current as a Similar Ministry and to retain the benefits of having my ministry's information on CPYR's website.

Initials: \_\_\_\_\_

## FOUNDER'S INFORMATION

Founder's Primary Contact Name(s) and Title(s): \_\_\_\_\_

Founder's Primary Contact Phone Number: \_\_\_\_\_

Founder's Email address: \_\_\_\_\_

Founder's Mailing Address: \_\_\_\_\_

\_\_\_\_\_

County (or Providence): \_\_\_\_\_

Do you have a personal Facebook account? Yes No

I agree to notify CPYR if this information changes.

Initials: \_\_\_\_\_



## ORGANIZATION INFORMATION

- Open – Serving participants
- Open – Limited Availability
- Temporary Closure – In Transition
- Not yet open but in process

How many months/years have you been serving participants? \_\_\_\_\_

How do you incorporate sharing the Gospel, the saving hope of Jesus through your program?

Is there anything more you would like to share about the status of your organization?

## RESOURCES

Who in your organization has attended the CPYR IGNITION/Information Clinic, and what year(s)?

Do you currently have a volunteer program in place?

How many session leaders do you currently have?

How many children/clients has your ministry served within the past year?

How many sessions have you personally facilitated in the past year?

Do you charge for any part of your program? If so, please tell us more about that.

Do you currently have any paid staff? If so, what roles do they fill?

How many horses are used in the ministry? In addition, please list other animals or assets integral to the direct ministry of your program.



Please choose the best description of facility ownership, availability, or use:

- The facility we operate on is owned by the ministry (Full Use)
- The facility we operate on is owned by the Founders and leased to the ministry (Full Use)
- The facility we operate on is owned by others and leased to the ministry (Full Use)
- The facility we operate on is owned by others and leased to the ministry (Partial Use)

What are the months of your operational season?

Please list the days of the week you are open for ministry:

## **TRAINING AND SAFETY**

What training do you require for each of your session leaders? How often?

What kind of safety training do you have in place for your staff and volunteers?

Are the leaders working with children in your program fingerprinted?

Do you require any of your staff, volunteers, or session leaders to be CPR/First Aid certified?

Describe the training your horses (or other ranch animals) in your program go through before eligibility in your program:

In what tangible ways do you offer hope and resources to kids and families in need? Please give examples.

After reading over the similar ministries qualifications insert in this application, do you believe your ministry falls within these guidelines? Why or why not?



## HANDS AND FEET OF YOUR MINISTRY

Please summarize an overview of your current board of directors and describe their primary method of support. (ex: actively involved, strictly financially involved, advisory on specific issues only, etc.)

How often do you meet?

Please list any core team members and their roles in the organization as well as the strengths they bring to your ministry. (ex: staff, volunteer coordinators, barn managers, session leaders, assistants, ranch pastors, grounds keepers, etc.)

## MINISTRY SPECIFICS

*CPYR may use the following information to refer requests to you from potential participants, volunteers & other similar ministry leaders.*

While CPYR serves a broad range of participants in our general ministry, we recognize that many of our Similar Ministries may also have specialized experience to serve certain groups of people. Others have limited capacity to serve only a specific population. Please help us better understand your unique call to ministry and clarify potential participants we might be able to send your way.

**Please check all that apply:**

- |   |  |
|---|--|
| <input type="checkbox"/> General Ministry                   | <input type="checkbox"/> Dog Training Ministry               |
| <input type="checkbox"/> Internships Available              | <input type="checkbox"/> Eating Disorder Recovery Care       |
| <input type="checkbox"/> Specialized Ministry               | <input type="checkbox"/> First Responder Ministry            |
| <input type="checkbox"/> Horses for Adoption                | <input type="checkbox"/> Foster Family Ministry              |
| <input type="checkbox"/> Horse Rescue                       | <input type="checkbox"/> Gardening Ministry                  |
| <input type="checkbox"/> Horse Training                     | <input type="checkbox"/> Grief Ministry                      |
| <input type="checkbox"/> Adult – Group Ministry             | <input type="checkbox"/> Human Trafficking Survivor Ministry |
| <input type="checkbox"/> Adult – Individual Mentorship      | <input type="checkbox"/> Juvenile Justice System Ministry    |
| <input type="checkbox"/> Day Camp Ministry                  | <input type="checkbox"/> Medical Hardship Ministry           |
| <input type="checkbox"/> Family – Group                     | <input type="checkbox"/> Military Family Ministry            |
| <input type="checkbox"/> Overnight Camp                     | <input type="checkbox"/> Military/First Responder Ministry   |
| <input type="checkbox"/> Residential Ministry               | <input type="checkbox"/> PTSD Specific Ministry              |
| <input type="checkbox"/> Youth - Group Sessions             | <input type="checkbox"/> Music Ministry                      |
| <input type="checkbox"/> Youth – Individual Sessions        | <input type="checkbox"/> Physical Disability Ministry        |
| <input type="checkbox"/> Youth – Street Ministry            | <input type="checkbox"/> Prison Ministry – Adults            |
| <input type="checkbox"/> Female Only Ministry               | <input type="checkbox"/> Suicide Prevention Ministry         |
| <input type="checkbox"/> Male Only Ministry                 | <input type="checkbox"/> Vocational Ministry                 |
| <input type="checkbox"/> Abuse Survivor Ministry            | <input type="checkbox"/> Other: _____                        |
| <input type="checkbox"/> Addiction Recovery Ministry        |  |
| <input type="checkbox"/> Adoptive Family Ministry           |  |
| <input type="checkbox"/> Art Ministry                       |  |
| <input type="checkbox"/> Autism Spectrum Ministry           |  |
| <input type="checkbox"/> Certified Counseling Services      |  |
| <input type="checkbox"/> Children of Prisoners Ministry     |  |
| <input type="checkbox"/> College Student Ministry           |  |
| <input type="checkbox"/> Deaf and Hearing Impaired Ministry |  |



## SUPPORT

What do you foresee as the top three needs of your ministry in the next year?

What do you see as the greatest area of need for your current team?

When available, are you interested in receiving notice of potential volunteers? Yes No

Are you currently able to facilitate a seasonal internship opportunity? Yes No

I acknowledge that any contacts received from CPYR will not be endorsed by CPYR, and I agree to perform my own interviews and background assessments.

Initials: \_\_\_\_\_

Are you interested in receiving notice of horse rescues or adoptable horses? Yes No

I acknowledge that any contacts received from CPYR will not be endorsed by CPYR, and I agree to perform my own communications and animal assessments.

Initials: \_\_\_\_\_

If yes, please make use of the following service created to share adoptable horses across the United States. You are also welcome to use this service if you have horses to offer for adoption.

<http://www.crystalpeakseyouthranch.org/join-the-cause/donate-adopt-a-horse/>

Are you interested in connecting with other Similar Ministries and startups in your region for prayer and counsel?

How can Crystal Peaks best support you and your ministry as you become more established in the following months?

Why is it important for you to become a Similar Ministry that stands united with Crystal Peaks?





## LOOKING FORWARD

*You are free to attach separate sheets as necessary.*

What are your ministry's short term and long term goals? (ex: programming, finances, board, building, leadership, training, etc.)

For the next 6 months (short term goals):

For the next year (long term goals):

In the next 5 years:

What steps will you need to take to meet these goals?



## **COMMUNITY AWARENESS**

How do you cultivate community awareness of your ministry? (ex: public speaking, social media, signage, newsletters, flyers, brochures, word of mouth, etc.)

What opportunities do you give your community to be involved in your ministry?

Are there any specific challenges that you have faced in your community?

Please list any other relevant information regarding your community:

## **FINANCE**

Do you disclose your ministry's management and financial standing on GuideStar.org or Charity Navigator? Why or why not?

How do you raise financial support for your ministry from year to year? (ex. Fundraisers, grants, donor support, and personal support)

How often do you communicate with your donors?

How do you show your appreciation to your donors?



## **PERSONAL INSIGHT**

All people involved in leadership at Crystal Peaks submit to a daily, active, growing relationship with God the Father, through Jesus the Son that is led by the Holy Spirit, followed by our marriages, children and family relationships, then, our ministry is last.

With the understanding that ministry can be a powerful and exhausting experience, describe the support you receive as a ministry leader.

Please describe ways you prioritize your marriage and family as you begin life in ministry:

Please describe how you stay encouraged during challenging times:

Within the ministry, please describe ways you take time to rest:

Please describe how you keep God first in your life:

How many hours of ministry do you typically work in a week? Please break down the approximate time spent in your various areas of service. (ex: Program Prep: 3 hours, Feeding/Horse Care: 10 hours, Session hours: 4 hours, etc.)

Please share some of the struggles and victories you've experienced in this past year. What do you think God was trying to communicate with you during those times?



We appreciate you taking the time to honestly answer these questions. A CPYR team member will be reaching out to you once we have reviewed your application. Please know that applications are processed the first week of every month and you will be contacted to schedule a time to personally review your application together.

Signature of Founder:

\_\_\_\_\_ Date: \_\_\_\_\_

(Office use only)

Signature of CPYR staff member reviewing form:

\_\_\_\_\_ Date: \_\_\_\_\_

Date of phone interview: \_\_\_\_\_ Time: \_\_\_\_\_

Recommendation of review: \_\_\_\_\_