

Green Dragon Temple / Green Gulch Farm Zen Center
FALL PRACTICE PERIOD APPLICATION
October 17 – December 12, 2017

Name _____ Date _____

Age _____ D.O.B. _____

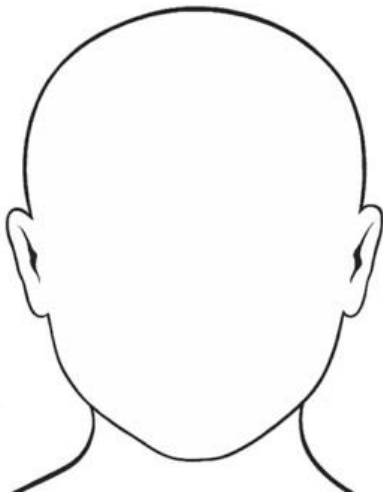
Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Alternate Phone _____

E-mail _____

Please put a head shot photo here



EMERGENCY CONTACTS

Name _____ Relationship _____

Email _____ Phone _____

Physician _____ Phone _____

Insurance Company _____ Phone _____

Insurance Policy Number _____

Have you practiced at San Francisco Zen Center before? If so, please give dates and briefly describe (Tassajara/City Center/Green Gulch, summer or guest student/WPA/practice periods)

Have you received Buddhist precepts? _____

Have you been ordained as a Buddhist priest? ____ If so, by whom? _____

Ordination date: _____

If you are currently practicing with a Buddhist teacher who does not live at one of the practice centers of San Francisco Zen Center, please ask your teacher for a letter of recommendation.

Please provide contact information so that we may reach your teacher, if necessary:

Name: _____

Address: _____

Telephone: _____

Email: _____

HOUSING: Roommate options (please select all that apply):

- I want to room with other women
- I want to room with other men
- I don't mind being in a mixed-gender room
- I want to be in a mixed-gender room

Factors affecting sleep (please check all that apply)

- Have insomnia or other sleep disorder
- Snore
- Other (please describe) _____

HEALTH RECORD: Circle Yes or No for the following questions.

- Do you have any long-term medical conditions, special medical needs, or a history of physical illness or limitations? Yes No
- Have you had a serious illness or major surgery within the last 5 years? Yes No
- Do you have any physical conditions or repetitive stress injuries that might limit your meditation or work practice? Yes No
- Have you ever been treated or hospitalized for a psychological condition? Yes No
- Are you currently receiving treatment for a psychological condition? Yes No
- Do you have any dietary or health restrictions? Yes No
- Do you have any serious allergies? Yes No
- Do you have any hearing difficulties or impairment in vision? Yes No
- Do you smoke, or use any kind of tobacco or nicotine products? Yes No
- Do you have any history of substance abuse, drug or alcohol addiction, or eating disorder? Yes No
- Have you participated in a recovery or treatment program for drug or alcohol addiction or an eating disorder? Yes No

If you answered Yes to any question, please describe in your Personal Statement (below), including dates when applicable.

MEDICATIONS: Please list below any prescription medication you are taking, including dosage and frequency of intake. (No need to include birth control or cosmetic prescriptions.)

Have you ever been convicted of a felony or serious misdemeanor?: Yes No

If yes, please state the nature of the offense(s), when and where convicted, and disposition of the case. Convictions for marijuana-related offenses that are more than two years old need not be listed.

Note: No applicant will be denied residency solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to being a student at Green Gulch may, however, be considered.

PERSONAL STATEMENT:

Please attach a personal statement, numbering your responses as follows:

1. Brief personal history
2. Any previous experience in Buddhist or other meditation practices

3. Intention in applying to Practice Period at Green Gulch at this time
4. Interest in continuing training at Green Gulch after the Practice Period, if any
5. Work experience and skills (please include any form of medical training or experience)
6. Physical or mental health issues, including any noted under Health Record, above

PRACTICE PERIOD REQUIREMENTS:

1. Following the schedule of morning and evening meditation, and morning, noon, and evening services of bowing and chanting.
2. Following the work practice schedule.
3. Attending Dharma talks, classes, formal meals (oryoki), and ceremonies.
4. Two one-day sittings plus a one-day tangaryo sitting and a seven-day sesshin.
5. Refraining from drug and alcohol use.
6. Refraining from initiating any new sexual relationships.
7. Not leaving Green Gulch for the duration of the practice period (except for emergencies).
8. Following the Green Gulch Practice Period Guidelines (Shingi).
9. Communicating with Practice Period Leaders, Tanto, or Director in a timely way if having difficulty with any of these requirements.

I agree to honor these requirements and have read the Green Gulch Practice Period Guidelines and agree to follow them completely.

Signature _____

PAYMENT IN FULL (\$2181) is required on arrival at the Practice Period, unless other arrangements have been made in advance with the director.

Application Deadline: The application deadline is August 15, 2017.

If you earned a scholarship or credit for this Practice Period by working at Tassajara or Green Gulch, please indicate here where and when you did so: _____

Please mail this form, your personal statement, a recent photograph, and a non-refundable \$30 application fee* to:

Practice Period Applications Committee
Green Gulch Farm Zen Center
1601 Shoreline Highway
Muir Beach, CA 94965
Attention: Tova Green, Assistant to Central Abbess

You may return this form by email to: tova.green@sfzc.org. You may also email your photograph. If you apply by email, please send your application fee or fee and photo to the address above.

For further questions, please contact Tova, by email tova.green@sfzc.org.

** Application fee waived for current SFZC residents.*