**IMS Retreat Support Fellowship Program Application**

Please respond to the application questions as completely as possible and provide a cover letter and résumé in addition to this form. Your application materials are confidential and will be reviewed by relevant IMS staff and teachers only.

Today’s date

**Applicant Information**

Name

E-mail

Mailing Address

City/State/Zip

Country

Daytime Phone

Are you a licensed driver? □ Yes □No Are you under 18? □ Yes □ No

Are you legally authorized to work in the U.S. on a full time basis? □ Yes □ No

How did you hear about this program?

IMS Website □ IMS Retreat □ Flyer □ Newspaper □ Word of Mouth □ Other □ Please specify:

Are you currently employed? Yes □ No □ If so, may we contact your present employer? Yes □ No □

**Application Questions**

How and when did you come to begin to practice meditation?

Briefly describe your meditation and/or spiritual practice and the importance of this in your life.

Indicate your meditation retreat experience. List teachers, dates, locations, and length of retreats.

Indicate any experience with IMS, such as volunteering or serving on staff, not described above.

What teachers have been most important to you in the development of your meditation practice? How closely have you worked with these teachers?

Have you completed a Teacher Training Program, Community Dharma Leader Program, Dedicated Practitioner Program or similar program? Have you been accepted into such a program? Have you been mentored by a meditation teacher? Have you served in a spiritual teaching, pastoral, therapeutic or counseling role before? Please provide relevant details regarding any training and professional experience you have that qualifies you for the program.

What skills or experiences demonstrate that you will be able to effectively support yogis in physical or emotional distress on retreat?

Why do you think this program would be a good fit for you at this time in your life?

**References**

Please list the names and contact information of four references who are not related to you. One of your references must be a meditation teacher who teaches at IMS. You may also include people with whom you have worked (at least one supervisor), and others who are familiar with your spiritual practice. IMS may contact your references as part of the application process.

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| --- | --- | --- | --- | --- |
|  | *Reference #1* | *Reference #2* | *Reference #3* | *Reference #4* |
| *Reference name:* |  |  |  |  |
| *Relationship to you:* |  |  |  |  |
| *Email address:* |  |  |  |  |
| *Phone number:* |  |  |  |  |

**Statement of Agreement**

I certify that all the information I have included in this application is true and complete. I authorize IMS staff to investigate my past employment, education and activities and I release from all liability all persons and organizations supplying such information. I understand that any false information communicated by me on this application shall be sufficient cause for denial of this opportunity or discharge.

I understand that neither this application, nor the granting of an oral interview, represents a contract or a promise of future benefits by IMS. I understand and agree that if selected my employment is not guaranteed but will be subject to ongoing review. I also understand that this written statement supersedes any and all oral representations that may be made by IMS representatives.

Signature Date

Please note your availability to start in your application and email your application to IMSjobs@dharma.org.