

# GUEST STUDENT PROGRAM APPLICATION



## Personal Information

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Male  Female  Transgender

## Length of Stay

Program runs Saturday evening through Friday morning

## Requested Dates

- Arrive on: Saturday, May 30 Depart on: Friday, June 5
- Arrive on: Saturday, June 6 Depart on: Friday, June 12
- June 13 thru 19 *This week includes Friendship Mountain dharma camp and must be connected to prior week for training. The schedule during Friendship Mountain week is unique. Please explore <https://www.ashlandzencenter.org/friendship-mountain-youth-camp/> before registering.*
- Arrive on: Saturday, June 20 Depart on: Friday, June 26
- Arrive on: Saturday, June 27 Depart on: Friday, July 3
- July 4 thru 10 *This week must be connected to prior week or following week for AZC closure July 5-6*
- Arrive on: Saturday, July 12 Depart on: Friday, July 17
- Arrive on: Saturday, July 19 Depart on: Friday, July 24
- Arrive on: Saturday, July 26 Depart on: Friday, July 31

## Room and Board

\$120 per week includes dormitory style lodging and all meals. Private accommodation for a single or couple is available on a limited basis for \$345 per week. Please inquire about this option at the time of registration.

Room and Board includes kitchen privileges for food beyond the meals provided, and laundry access. Friday night is included at no extra charge for students staying with us more than one week. Please note that all meals served at Ashland Zen Center are vegetarian. We encourage the practice of no picking and choosing.

## Payment

\$120.00 per week for \_\_\_\_\_ week(s). Total for my stay: \$ \_\_\_\_\_

Check Enclosed  Paying via PayPal

I am interested in private accommodations for \$345/week (limited availability). I will pay the dorm rate and pay the balance before arrival if I am notified that this limited availability private accommodation is available.

## Emergency Contacts

In case of an emergency, please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

My relationship to the person above: \_\_\_\_\_

## Health Record

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Therapist: \_\_\_\_\_  N/A Phone: \_\_\_\_\_  N/A

Insurance Policy Number: \_\_\_\_\_

Circle YES or NO for the following questions:

**YES NO** I have a long-term medical conditions, special medical need, or a history of physical illness or limitation

**YES NO** I have had a serious illness or major surgery within the last 5 years

**YES NO** I have a physical condition or repetitive stress injury that might limit my meditation or work practice

**YES NO** I have been treated or hospitalized for a psychological condition

**YES NO** I am currently receiving treatment for a psychological condition

**YES NO** I have a hearing difficulties or impairment in vision

**YES NO** I have insomnia/other sleep disorder

**YES NO** I smoke or use a tobacco or nicotine products.

*While Ashland Zen Center is a non-smoking non-vaping facility we would like to know your current state of use*

**YES NO** I have a history of substance abuse, drug or alcohol addiction, or eating disorder

**YES NO** I have participated in a recovery or treatment program for drug or alcohol addiction or an eating disorder

If you answered YES to any question, please describe in your Personal Statement (below).

## Medications

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

**List here:**

**YES NO** I have been convicted of a felony or serious misdemeanor

If yes, please state the nature of the offense(s), when and where convicted, and disposition of the case.

Convictions for marijuana-related offenses 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 Ashland Zen Center may, however, be considered.

**Describe here:**

## Personal Statement

On a separate piece of paper, please write a personal statement addressing the subjects below, and number each section as follows:

1. Why are you applying to the Ashland Zen Center Student Program at this time?
2. Do you have any previous experience in Buddhist or other meditation practices?
3. Do you have any previous experience living in community?
4. A brief personal history.
5. Work experience and skills. Please include any form of medical training or experience.
6. Any physical or mental health issues, including those noted under Health Record (above).

## Student Practice Requirement

1. Follow the daily half-day schedule of meditation, *samu* (work) and meals, Sunday through Friday. Afternoons are personal time. Saturday is a personal day for students staying longer than one week.
2. Clean your personal space on the Friday of your departure, according to the provided cleaning standards.
3. Keep your personal space and communal areas clean during your stay.
4. Refrain from drug and alcohol use. Ashland Zen Center is a non-smoking/vaping facility.
5. Refrain from inviting outside people to the Center unless by permission.
6. Refrain from initiating any new sexual relationships during your stay.

I have read the above requirements and I agree to follow them completely.

Signature: \_\_\_\_\_

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

## Include With Your Application:

- Check or money order for application fee based on your length of stay. *Ashland Zen Center follows all guidelines for health and safety outlined by Oregon Governor Kate Brown. You will be refunded for any cancellation due to the Coronavirus.*
- Personal Statement
- Two letters of reference: one work/school and one personal.

Send your application, check or money order, personal statement, and references to:

Ashland Zen Center  
Guest Student Program  
740 Tolman Creek Rd.  
Ashland, OR 97520

For additional information email [gueststudent@ashlandzencenter.org](mailto:gueststudent@ashlandzencenter.org) or call (541) 552-1175