

Thomasville Buddhist Center

Repa Bushi Yamato Damashii, Abbot & Director

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Student Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list two personal references.

Full Name: _____ Relationship: _____
How Long?: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
How long?: _____ Phone: _____
Address: _____

Previous Meditation/Practice Experience

Community: _____ Phone: _____

Address: _____ Teacher: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Community: _____ Phone: _____

Address: _____ Teacher: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Please explain your motivation for desiring to Become a Student/Mentee

Please explain (please be as clear as possible, so that we can best understand you, and your intentions):

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

(TEACHER USE ONLY)

APPROVED/DENIED

Approved By _____