



# VIPASSANA RESEARCH INSTITUTE

PARIYATTI BHAVAN, GLOBAL VIPASSANA PAGODA CAMPUS, NEXT TO ESSEL WORLD,  
GORAI VILLAGE, BORIVALI ( WEST ), MUMBAI – 400091, MAHARASHTRA, INDIA.

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WEBSITE: [www.vridhamma.org](http://www.vridhamma.org)

## APPLICATION FORM FOR PALI COURSE (2018)

I. Course Detail											
From (Date)			To (Date)			Course					
Can you read, write and understand the language in which the course is being conducted?										Yes	No
Other Language Known :						Affix your recent Photograph					
<b>II. Personal Information (In Block Letters)</b>											
Name		Middle Name		Last Name							
Gender :		Date of Birth : DD/MM/YYYY			Age (Yrs) :						
Educational Qualification :						Total years of Education :					
Home address											
Country			State		City/Town						
Telephone No.				Mobile No.							
E-mail ID											
Student		Yes	No	If you are a student, please fill in current details							
Course				Subject							
College / University											
Occupation											
Experience in other field											

<b>III. Details of experience in Vipassana Meditation</b>							
Are you committed exclusively and fully to the practice of Vipassana Meditation as taught by Shri S. N. Goenka & his Assistant Teachers?							
How many courses you have attended with Shri S. N. Goenka or his Assistant Teachers?							
10-Day	STP	Spl. 10-Day	20-Day	30-Day	45-Day	TSC	60-Day
Details of Courses		Year	Place / Centre		Name of AT		
First Course							
Latest Course							
Latest Long Course							
Are you following the five precepts scrupulously for last one year?							
Are you maintaining daily morning and evening meditation practice of one hour each, for past two years?							
<b>Submission of AREA TEACHER/ SENIOR A.T. RECOMMENDATION FORM is compulsory for students doing Residential course. (Form on next page)</b>							
1. Do you have any past or present physical or mental diseases? If YES, please give details.							
2. Please enclose separately a brief biography.							
3. Please enclose separately a description of your participation in any of the affiliated Vipassana centres or organizations, specifying whether or not you have been involved in service anywhere, and if so to what extent.							
4. <b>Note:</b>							
1. Please send a copy of your Educational Qualification Certificates with the form.							
2. You may also send scanned copy of the form and certificates via email to <a href="mailto:mumbai@vridhamma.org">mumbai@vridhamma.org</a>							
<p>I, Declare that I shall abide by the rules and discipline of Vipassana Research Institute till the end of the course. I will also abstain from any vocal or physical actions that may disturb the Dhamma atmosphere or the students participating in meditation and Pali study programme.</p> <p>Place : Date :</p> <p style="text-align: right;">Signature</p>							

**AREA TEACHER/ SENIOR A.T. RECOMMENDATION FORM**  
**(Mandatory for students doing Residential course only)**

TO BE COMPLETED BY AN AREA TEACHER OR SENIOR A.T.

(Please send this form directly to the above address or you may send a scanned copy to [mumbai@vridhamma.org](mailto:mumbai@vridhamma.org) for earlier notification)

Name of Applicant : \_\_\_\_\_

Name of Area Teacher: \_\_\_\_\_

1. How long have you known this applicant?
2. How many courses have he/she served with you?
3. In your opinion is the applicant fully committed to the practice of Vipassana meditation as taught by Shri S.N. Goenka?

**From your discussions with the applicant:**

1. Does he/she have a realistic understanding of the conditions in India and Dhamma centers in India-cultural, climatic etc.?
2. In your opinion, is he/she able to adapt to such conditions?
3. Is he/she prepared to respect and follow the directions of the Teacher and management of Vipassana Research Institute?
4. Is he/she able to live in harmony with fellow students of varying backgrounds?
5. Does he/she have the volition not only to meditate but also to make all efforts to fully commit to this intensive language course?
6. Will he/she be willing to accept the facilities offered without expecting special arrangements?
7. Does he/she understand that he/she has to follow the prescribed Timetable meticulously which include study classes, self-study & meditation?
8. Does the student have a good working knowledge of English language?
9. Is he/she maintaining the daily morning and evening meditation practice regularly since last one year?
10. Is he/she following the five precepts scrupulously for the last one year?
11. How would you rate the applicant in the following areas?

Self-dependence:	Adaptability:	General emotional maturity:

Please add any further relevant information known to you about the student.

In summary, will you recommend this applicant?

Date: \_\_\_\_\_ Recommending Area Teacher's Signature: \_\_\_\_\_