

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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APPLICATION FORM

I. Course D	etai	ls																		
From (Date)	To (Date)					University of Mumbai affiliated Course						Medium of Instruction								
8 th July 2020	23 rd Sept 2020					'Introduction to Vipassana Meditation' - Short Course							Hindi & English							
Can you read, write conducted?	te an	d u	nde	rstar	ıd th	ie lai	ngu	age i	n w	hich 1	the c	our	se is	bei	ing		Y	es		No
II. Personal	Inf	or	ma	tion	1	(In	Bl	ock	Let	ters)										
Last Name																				
First Name												Affix your recent Photograph								
Middle Name																				
Gender (Click ✓)	Marital Status					Date of Birth:						Age:								
						DD/MM/YYYY								1						
Address & Pin Code																				
Aadhaar No.																				
Telephone No.				•		•		Mol	oile	No										
E-mail ID																				
Educational Qualification	Total year Education									of										
Are you	Yes	Yes No If you are a student, please fill in current de									letai	l ab	out	Cou	ırse	&				
Student ? (Click ✓)				Subject Institute Name:																
Have you learnt	7	es		No			If Yes, When?					Institute Name								
Pali Language ?																				
Occupation						Occupation Detail														
Experience in other fields																				

III. Details of experience in Vipassana Meditation											
	• Have you completed a 10-day course with S.N. Goenka or any of his assistant teachers ? (Click ✓)										
If Yes, please give Details of experience in Vipassana Meditation											
1. Are you committed exclusively and fully to the practice of Vipassana Meditation as taught by Shri S. N. Goenka and his Assistant Teachers ? (Click ✓)											
2. Write below the number of 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	60-Day	TSC				
Details of	Courses	Year	Dlag	ce / Centre		Name of	AT				
First Cour		1 cai	1 140	Le / Centre		Name of A 1					
Latest Co											
3. Are you following the five precepts scrupulously for last one year ?											
4. Are you maintaining daily morning and evening meditation practice of one hour each, for past two years?											
IV. Other Extra Details											
1. Do you have any past or present physical or mental diseases? If YES, please give details.											
2. Are you a Vipassana Teacher? : No /AT / SAT / Teacher											
I undertake to abide by the rules, regulations and discipline of Vipassana Research Institute during the course.											
DI.											
Place :											
Date:											
	Signature										

Note: Scanned copy of completely filled application form, along with photograph and educational certificate may be sent to $\frac{1}{2} \frac{1}{2} \frac$