**Application *for the* Nyingma Institute**

**Residential Work-Study Program**

Thank you for your interest in Residential Work-Study at Nyingma Institute. This program is designed for individuals who want to see what it is like to live in an intentional Buddhist community that focuses on service to the Dharma and that offers a path that integrates work and spiritual life. You do not need to be Buddhist, but we ask that you be open and respectful of what we do, ready to join in, and willing to learn.

**Application Instructions**

Please send a photo, resume, and this completed application to nyingma.mandala.workstudy@gmail.com

1. Photo - Please include a full-face photo of yourself that you feel will give us a sense of who you are. It does not need to be a formal portrait; a casual picture with family and friends or by yourself is fine. JPEG or PNG files are preferred.

1. Resume - Please attach a resume.

1. Application Form - When you are finished with this application, save the form, giving the file a name that starts with your last name. Please submit your photo and this application as separate attachments.

Please do not use ChatGPT or AI generated content to fill out the application; we want to hear your authentic voice as much as possible.

**Application Process**

Applications are initially screened by the Volunteer Committee. This is followed by a phone or Zoom interview or an in-person visit for those located nearby. The next step is usually reference checks, but we may also ask for more information.

Because you will be living in a small and interactive community, we ask for more personal information than you would find in a job application. We want to make sure that the program will be a good fit for you, and also that you’ll be a good fit for the community.

**Things to Keep in Mind**

This is an intensive program. Work, study, and practice combined will take an estimated 60 hours a week of your time. Please do not plan on making other commitments while you are in the program.

You will receive room and board, and a small living reimbursement of $300/month. This likely means that you will need some savings in hand before you start the program, and also enough to cover travel costs to and from Berkeley if applicable.

Your first month in the program is a trial period. We reserve the right to ask you to leave at any time and for any reason, but we will meet with you to discuss our reasons and give you an opportunity to respond. In urgent cases, we reserve the right to ask you to leave within 72 hours.

It is important that you have a clearly defined exit plan in case things do not work out: a place to go, funds to get there, and friends or family who will welcome you.

We maintain a set of fairly straightforward rules for living in the community, called the Code of Conduct, which we send to applicants after they are accepted.

If you are accepted into the program, you will be asked to provide your Social Security number and a copy of your driver’s license, passport or other suitable picture ID on arrival. This is for tax reasons so that we can offer you your monthly living reimbursement.

**PERSONAL DATA**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name you like to be called and/or pronouns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_ Place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_ Marital Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any children or dependents?

Please list ages and relationship to you:

Current Housing Arrangement: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person to contact in case of emergency:

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

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

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

Relationship to you: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you own a car? Yes No Make and model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you plan to bring it with you? Yes No Not Sure

Ideal start date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about our program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you found us online, what key words or websites in your search led you to our organization? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATION AND EMPLOYMENT HISTORY**

*Please attach your resume or CV.*

For each employment position listed on your resume or CV, please describe briefly why you left each position. Were any of your departures difficult and if so why?

**APPLICATION QUESTIONS**

Section A - PERSONAL INTEREST

1) Why would you like to be in this program? How do your personal goals and interests fit with what you know about our community?

2) Please describe why you’ve decided at this time to embark on this commitment.

3) What is your current living situation like? Is there anything about it that you would miss?

4) Have you lived in a community setting before? If so, please describe.

5) Please describe 3 of your personal strengths.

6) Please describe 3 of your personal weaknesses.

7) What do you hope to gain, learn, and contribute while you are here? What is one important way in which you’d like to challenge yourself?

8) Please write a brief comment about the photo you have submitted. Why did you choose this photo?

Section B - PRACTICAL

9) Do you have the support of your family and/or friends for this commitment? Have you discussed this program with them?

10) Do you have sufficient savings or other funds to meet your expenses (including student loan payments, or car maintenance, if applicable) throughout the duration of the program and travel home after the program's completion?

11) What is your exit strategy, if you arrive and then discover it is not a good fit? Is there anything that would make it difficult for you to leave?

12) Will you have any other obligations during the time that you are participating? Examples: family visits, financial commitments, studies, medical treatments or spiritual practices. Please describe.

Section C - SPIRITUAL BACKGROUND

13) Describe the three most important books about Buddhism, spirituality, philosophy, or the mind that you have read, and how each had an impact on your experience.

14) Describe any other exposure you have had to Buddhism or other spiritual traditions, or to secular mindfulness. If you have ever attended programs at any Buddhist or spiritual center regularly for more than two months, please include the name of the center.

15) Do you meditate or do any spiritual or movement practices regularly? Please briefly describe the types of meditation or practices that you do.

16) Are you familiar with any books or teachings by Tarthang Tulku? Have you ever taken a course or program at one of our organizations? If so, please describe.

Section D - WORK ASSIGNMENT

17) Volunteers at the Nyingma Institute perform a variety of duties. Do you have special skills or training that could help our organizations in their work? Please describe. (Here are a few possibilities: office skills, grounds maintenance, building maintenance, graphic design, cooking for large groups, fundraising, event planning, website maintenance, grant applications, sacred art, bookkeeping, computer programming, network administration.)

18) What kinds of work do you especially like to do?

19) What other activities do you find fulfilling? This could include hobbies, sports, etc.

Section E - HEALTH AND PERSONAL HISTORY

20) Do you have health insurance? If applicable, please note until what date you are covered. Please note that we recommend travel insurance for international travelers.

21) We may ask that participants help with house chores and tasks that involve standing while working, lifting and carrying objects, and going up and down flights of stairs. We also sometimes burn incense during special events, and our housing has beautiful views but also thin walls and sometimes street noise is audible. Do you have any conditions that could make performing vigorous physical work difficult, or sensitivities that we should be aware of?

22) We serve vegetarian food, and do not allow meat on our premises. Do you have any special dietary restrictions or requirements?

23) Please help us understand your mental health history and any current emotional or psychological work that you are doing:

A) Have you ever been diagnosed with any mental/emotional health conditions? If so, have you been prescribed medication or spent time in an institutional setting? How long ago was this? (Please note that we ask that all participants continue taking prescribed medications as directed while here, unless instructed otherwise by their doctor.)

B) Have you ever had difficulty with abuse of or addiction to nicotine, alcohol, prescription drugs, recreational drugs, or over-the-counter medications? Please describe.

C) Are you currently dealing with or recovering from any issues related to mental/emotional health or addiction? Please describe.

24) Have you ever been convicted of a crime? Please provide relevant details.

Section F - INTERNATIONAL APPLICANTS

25) If you are not a U.S. citizen, are you currently within the United States? If so, what is your legal status in the U.S? If you have a visa, what type is it, and when does it expire?

26) Please note that for international volunteers, we are unable to offer the monthly living reimbursement due to their special legal status here. We provide housing and all meals, but not personal items such as shampoo and soap, or expenses like public transportation and dining out. Do you have enough savings to participate given this stipulation?

Section G - REFERENCES

Please list name and contact information, including email, for 4 references. Indicate how long you have known each reference. Include at least 2 employment/ professional references and one reference from a family member or family friend (please specify) who has known you for 10 years or more. Volunteer-related and school references are fine.

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

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

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

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of relationship, and for how long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of relationship, and for how long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of relationship, and for how long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

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

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nature of relationship, and for how long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check that you agree with each of the following:

\_\_\_ I understand that I am applying for a program that includes participation in a 6-day work week, required meditation practice sessions, and evening and weekend classes and programs.

\_\_\_ I agree to be responsible for obtaining health insurance and maintaining it in good standing while I am enrolled in the program, and will provide proof of insurance within 30 days of starting the program.

\_\_ I will be flexible about my work-practice placement, which may change depending on the needs of the community.

\_\_\_ I will use my best efforts to live in harmony with other members of the community, to support their spiritual practice, and to practice mindfulness and compassion.

\_\_\_ I will assume full responsibility for my own safety and assume the risk of any activity in which I agree to participate.

\_\_\_ I understand that the work I am asked to do will vary, that I may be asked to work for different organizations and on varying schedules, and that I will be asked to participate in routine activities such as clean-up, cooking, and maintenance.

\_\_\_ (If you plan to bring a car) I have liability and accident insurance for my car, and will provide proof of insurance on my arrival. I agree to keep my insurance current for as long as I have the car.

\_\_ I understand I will be asked to leave the program immediately for the use of illegal drugs or public intoxication. I understand that I can be asked to leave for any other reason after having an opportunity to discuss the situation with at least two senior members of the community.

\_\_\_ I have answered everything truthfully.

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