Florida Community of Mindfulness

**Application For Retreat Scholarship**

Applicant Name

Email Address Phone Number

Scholarship Request (select one)

\_\_\_\_\_Partial Scholarship (please indicate the amount that you would be able to pay for the retreat.)

\_\_\_\_\_Full Scholarship

**Mark the following that apply to you:**

\_\_\_\_\_ I am a member of FCM

\_\_\_\_\_ I have been attending FCM sangha regularly for at least 6 months

\_\_\_\_\_ I have a daily sitting meditation practice

\_\_\_\_\_ I practice mindfulness daily in my life

\_\_\_\_\_ I have attended at least FCM Days of Mindfulness, Half-Days or Daylong programs

\_\_\_\_\_ I regularly perform selfless service for FCM to support sangha activities

\_\_\_\_\_ I have participated in at least one FCM Intensive

\_\_\_\_\_ I have had at least one personal interview with the teacher, Fred Eppsteiner

**Please write a brief descriptive paragraph that includes:**

1. Why I want to attend this retreat
2. How it will support my spiritual intention and practice
3. Why I am requesting a scholarship at this time

**Submit Application To**: Dharma Program Leader, Betsy Arizu at [barizu@yahoo.com](mailto:barizu@yahoo.com) before the retreat registration deadline.