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 before the retreat registration deadline.