APPLICATION FORM VISITORS TO EVENTS 2024

Sannyasa Peeth Paduka Darshan PO Ganga Darshan, Munger Bihar 811201, India **Recent Photo**

Please fill in this application form in **CAPITAL LETTERS using black ink**. All personal information disclosed here will be treated confidentially. The date for receiving applications with all annexure closes **1 month prior to intended arrival date**. Late and incomplete applications will not be accepted.

All guests are expected to abide by the rules of the ashram, maintain the discipline and also participate in the daily activities and seva. Admission policy is selective and a personal introduction is preferred when accepting applications. The ashram reserves the right of admission to any training, program or event.

Intended arrival date:; departure date:						
FOR OFFICE USE ONLY						
Application form received on: By: post / hand / other along with:						
2 Photos (affixed to form) Aadhaar card (national) Passport copy (overseas)						
List of current medications Medical report						
Declaration by applicant Other:						
Admission letter sent on: By: post / hand / other						
PERSONAL INFORMATION						
1. Full name:						
Spiritual name (if any):						
3. Diksha: Mantra / Jignasu / Karma / Poorna (circle one) Given by:						
4. Sex: Male Female						
5. Age in years: Date of birth: Day Month Year						
6. Marital status: Married Unmarried						
. Name and age of husband/wife; name/s and age/s of children, if any:						
8. Permanent address:						
Pin/Zip						

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9.	,						
10.	Your email ID: Website:						
11.	Phone number: Home: Mobile: Work:						
12.	Family contacts: Father: Mother: Other:						
13.	B. How are you connected to Sannyasa Peeth, or were you referred by someone? Give details:						
14.	. In case of emergency, please contact: Name:						
	Relation:Phone:						
	Email:						
	PERSONAL IDENTIFICATION						
15.	Present nationality:						
16.	5. Birthplace: City: State: Country:						
17.	7. Facebook ID: Twitter ID:						
18.	3. Drivers license no.: valid until:						
19.	. For nationals: Aadhaar Card:						
	For Overseas applicants: Passport no						
20.	Native language:						
21.	English proficiency: Fluent Average Poor						
22.	. Spoken languages and level of proficiency:						
	EMPLOYMENT & PROFESSION						
22	Professional qualifications:						
	24. Present occupation/profession:						
	ASHRAM EXPERIENCE						
25. Have you stayed at Munger ashram before? Y / N If yes, list periods of ashram experience:							
	Year Duration Purpose						
	Year Duration Purpose						

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26.	Have you visited any other ashram? Y / N If yes, give details:								
	Year	Ashram name, location	Duration of stay	Activity/involvement					
	MEDICAL DETAILS								
27.	7. Do you have any dietary restrictions? Y/N If yes, give details:								
28.	Are you ta	king any medication/s at present	? Y / N If yes, give name						
29.	 If you have any current physical health problems, allergies, illnesses or diseases, give full details on a SEPARATE SHEET; including medication being taken, restrictions in and management of the condition, and provide below the contact details and phone number of your doctor in the case of an emergency: 								
30.	. Have you suffered from any major illness in the past? Y/N If yes, give details:								
31.	•	ve a history of any mental health edetails of symptoms, duration, to		•					
32.	including r	•	ons in management of the	ve full details on a SEPARATE SHEET; issue, and provide below the contact					
33.	Have you	ever been tested positive for Covi	d-19? Yes / No.						
	If Ves nlea	ase specify date (month / year).							

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DECLARATION BY THE APPLICANT

- I, the undersigned, declare that the information given in this application is true, complete and accurate to the best of my knowledge.
- 2. I understand that if during the interview and admission procedure it is found that the information given in this form is incorrect, I will not be eligible.
- 3. I further declare that there are no criminal or civil litigation or charges against me.
- 4. I am solely responsible for my health, welfare and medication while I undergo yoga training in the campus.
- 5. I am of sound physical, mental and emotional health. If found to be not in good health, I will leave the training and campus for proper medical care.
- 6. In case of any emergency or unforeseen medical situation or treatment, all expenses will be borne by me and I will not hold Sannyasa Peeth liable in any regard in relation to the same.
- 7. I will contribute to and participate in all the activities of the ashram wholeheartedly in the spirit of nishkama seva (service without personal motive).
- 8. During my stay I will lead a life of sanyam (restraint in thought, word and deed), sahayoga (willing cooperation) and shanti (harmony & peace) and follow all the rules of Sannyasa Peeth Campus.
- 9. If I am not able to follow the above, and/or the Administration asks me to leave, I agree to do so at the earliest.

Signed	D	ate
Checklist	st of documents to enclose with this application:	
	2 current passport-size photos (affixed to form)	
	Photocopy of Aadhaar card (national applicant)	
	Photocopy of passport (overseas applicant)	
	Medical details (including Medical Report or Medical Fitness Certific	ate) if applicable
	Self-addressed, stamped envelope for Registered Post (national appl	icant)