

**Office Use Only**

Application Received \_\_\_\_\_ Residency Interview \_\_\_\_\_ Move-in Date \_\_\_\_\_

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**Dharma Rain Zen Center Residential Training Program  
~ Application Packet ~**

You should also have received the *Guide to Residential Training at DRZC*.

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**Application Form**

Instructions: Please fill out the basic information below. Then answer the questions that follow clearly and succinctly, yet thoroughly. Use separate paper when necessary, and attach it to this sheet. All answers will be strictly confidential.

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

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Date this application was submitted: \_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_

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

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Do you have medical insurance? \_\_\_\_\_ (Y/N)      If yes, give name of provider and the  
account number if known: \_\_\_\_\_ # \_\_\_\_\_

Do you have a medical condition or drug allergy that a treating physician or medical professional should be informed of in case of emergency? Please describe.

We do background checks on all applicants. Please supply three references.

## Application Questions:

1. What is your previous experience of Zen? Have you attended other Zen Centers? Retreats? How about other meditation oriented groups and practices? How familiar are you with basic Buddhist teaching?
2. How is your health? Please list any ailments or problems we would need to know about in case of emergency, and any that would affect your ability to participate fully in the program at Dharma Rain Zen Center. Also, list any prescriptions for psychotropic drugs you might have, and why you are taking them.
3. Do you have any history of drug or alcohol problems? \_\_\_\_\_ Are you now, or have you ever been, a regular participant in a 12-step program? \_\_\_\_\_ If “yes”, please supply a brief description of your history, including how you feel you are doing now. Also, state if there any special way being at the Center could be of help to you.
4. Do you have any history of mental or emotional problems? \_\_\_\_\_ Specifically: have you ever been hospitalized for mental or emotional problems \_\_\_\_\_; have you ever been on medication for mental or emotional problems \_\_\_\_\_; have you ever consulted a psychiatrist, psychologist, or therapist for mental or emotional problems \_\_\_\_\_? Please write a brief explanation for any “yes” answer.
5. Please write a brief explanation of what you see as your main purpose in taking up residency at the Zen Center. Be down to earth. Focus on where you are in your practice now, and what changes in your life you would like to effect. Also: how long a stay do you have in mind?
6. What expectations do you have about living at the Center? Write a little about what you think you might enjoy the most, what you think will be the most difficult, and what you hope to learn. What do you expect the teachers to provide? How much daily zazen do you expect? How much reading and study? How much work? How much personal direction?
7. Write a brief description of yourself. Are you outgoing, a people person? Or are you self contained, quiet? Think of the words you would use to describe yourself (i.e., thoughtful, adventurous, gregarious, reliable, intelligent, intuitive, spontaneous, feeling, intense, sensitive, complicated, uncomplicated, careful, straightforward, etc.). Try to describe the qualities that fit you the best. For example, “I don’t say much, but people can always count on me to come through.” Or, “There’s nothing I like better than being with spontaneous people.” Please be both honest and thorough.
8. What would you say is your greatest strength? What is your greatest weakness?
9. What kind of people drive you nuts (or used to drive you nuts?) What do they do that drives you nuts (or used to drive you nuts)? Everybody is inclined to be aggravated by something, so be honest.
10. Where do you think you are going in life? Do you have plans for what will come after your stay at the Zen Center? If no definite plans, in what direction would you like to move?
11. Do you have any experience or skills that might be of value to the Zen Center community? How would you like to contribute? How important is being part of a community to you?  
\_\_\_\_ Very important; \_\_\_\_ Important; \_\_\_\_ Moderately important; \_\_\_\_ Not important.

Thank you for taking the time to answer these questions.