

Green Dragon Temple / Green Gulch Farm Zen Center  
**FALL PRACTICE PERIOD APPLICATION**  
**October 12 – December 7, 2010**

**Part I. Please provide the following information.**

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_  
e-mail: \_\_\_\_\_ FAX: \_\_\_\_\_

In case of emergency, whom should we notify?

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (home) \_\_\_\_\_ (work) \_\_\_\_\_  
e-mail: \_\_\_\_\_

Have you received Buddhist precepts? \_\_\_\_\_

Have you been ordained as a Buddhist priest? \_\_\_\_ If so, by whom? \_\_\_\_\_

Ordination date: \_\_\_\_\_

If you are currently practicing with a Buddhist teacher who does not live at one of the practice centers of San Francisco Zen Center, please ask your teacher for a letter of recommendation.

Please provide contact information so that we may reach your teacher, if necessary:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Have you practiced at one of Zen Center's three practice places before? If so, please list dates of sesshins, staff positions, and any Practice Periods you have attended. Please list the teacher who led your last Practice Period at Zen Center, and your most recent practice leader at Zen Center.

Are you interested in continuing in residential practice at Zen Center after this Practice Period? If so, please describe. \_\_\_\_\_

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**Part II. Please attach a statement discussing each of the following, numbering your responses:**

1. Your interest in Zen and in participating in the Practice Period at this time
2. A brief personal history
3. Your experience studying and/or practicing Buddhism or other spiritual traditions (other than at San Francisco Zen Center)
4. Significant physical, psychological, or emotional difficulties, particularly those for which you have received professional help or been hospitalized: Please list dates, if applicable.
5. Current use of prescription medications: If any, please list medications and briefly describe the conditions being treated.
6. History of alcohol or substance abuse: Please list any treatment programs and dates.
7. Current tobacco use
8. Any past or current eating disorders
9. Any current medical difficulties (e.g., back, sciatica, or knee injury, repetitive stress conditions, food or other serious allergies)
10. Any particular skills or training (e.g., plumbing, carpentry, computer, sewing)
11. What level of physical work would be most suitable for you—heavy, moderate, or light? Indoors or outdoors?

**The Practice Period involves:**

- 1) A schedule of early morning and evening meditation
- 2) A daily service of bowing and chanting
- 3) Several hours of classes and lectures per week
- 4) Formal meals and ceremonies
- 5) Refraining from recreational drug and alcohol use
- 6) Refraining from initiating any new sexual relationship
- 7) Remaining at the center at all times during the Practice Period except for such things as medical emergency

I have read, understood, and kept a copy of the Practice Period schedule and guidelines and it is my intention and desire to follow them wholeheartedly.

\_\_\_\_\_ Date \_\_\_\_\_  
Signature

**Payment in full** (\$1750) is required on arrival at the Practice Period, unless other arrangements have been made in advance with the director. **The application deadline is August 20, 2010.**

**If you earned a scholarship** for this Practice Period by working at Tassajara or Green Gulch, please indicate here where and when you did so:

Please mail this form, your personal statement, **a recent photograph**, and a non-refundable \$30 application fee to the **Practice Period Applications Committee, Attention: Maria Linsao** at:

**Green Gulch Farm Zen Center  
1601 Shoreline Highway  
Sausalito, CA 94965**

**You may return this form by email** to: [gfgconference@sfzc.org](mailto:gfgconference@sfzc.org). You may also email your photograph. If you apply by email, **please send your application fee or fee and photo to the address above.**

**For further questions**, please contact Maria Linsao, at (415) 354-0414, or email [gfgconference@sfzc.org](mailto:gfgconference@sfzc.org)