# Scholarship application form for Samavesha 2017.

#

# Please send this form to Hilary Davis, hilary@anusarayoga.com**, once completed.**

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| --- | --- | --- |
| **Name** |  | **Note** |
| **Nationality** |  |  |
| **Address** |  |  |
| **Telephone number** |  |  |
| **Email address** |  |  |
| **Licensed Teacher (Yes/No)?****Level of License** |  |  |
| **Date of request (dd-mm-yyyy)** |  |  |
| **Sponsor’s name** |  | **1** |
| **Sponsor’s email address** |  |  |
| **Please provide below a summary of your yoga experience to date. Please include any Anusara® training you followed.** |
|  |
| **Please describe below your motivation for attending Samavesha 2017.** |
|  |
| **Amount of discount requested (%)** |  |  |
| **Please describe below your reason for requesting scholarship.** |
|  |
| **Please confirm you are prepared to do volunteer work?** |  | **2** |
| **What are your skills that could be useful as a volunteer?** |  |  |
| **Do you speak English?****If Y, please indicate level** |  |  |
| **Do you speak Italian?****If Y, please indicate level** |  |  |

**Notes**

**1** The sponsor needs to be a licensed Anusara Teacher

**2** Scholarship recipients will be requested to do up to 10 hours of volunteer work. Typical volunteer roles include: room host, manning the information desk, providing security and looking after the puja’s