

Name allocated

date approved

by

SALT SPRING VIPASSANA SOCIETY

## **FINANCIAL ASSISTANCE APPLICATION**

*Salt Spring Vipassana Society has some limited funds available for financial assistance for retreats in the Theravadan/Vipassana/Insight meditation tradition*

- *The maximum amount that can be awarded to any individual is \$500.00 . Exceptions may be made in special circumstances.*

***SSVS will provide financial assistance to an individual only once per calendar year.***

*Complete the Financial Assistance Application and mail to:*

**SCHOLASHIPS SALT SPRING VIPASSANA SOCIETY  
190 REYNOLDS ROAD  
SALT SPRING ISLAND, BC  
V8K 1Y2**

If you are not able to print and mail this form, please answer the questions below in an email to: **SSVIPASSANA@GMAIL.COM**

*We hope to respond to any requests within two weeks of receipt of an Application.*

*Scholarship funds will be forwarded to the retreat registrar on your behalf upon confirmation of your attendance at the retreat.*

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

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Occupation: \_\_\_\_\_

Email address: \_\_\_\_\_

Retreat Location and Dates: \_\_\_\_\_

Cost of Retreat: \$ \_\_\_\_\_

Have you requested financial assistance from another source? \_\_\_\_\_

How much can you afford to pay? \_\_\_\_\_

Have you received financial assistance from another source? If yes, how much?

\_\_\_\_\_

Amount I am requesting from SSVS: \$ \_\_\_\_\_

Brief Reasons for requesting Financial Assistance:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you received financial assistance from SSVS in the last 12 months? \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_