



kula kamala foundation

empowering communities through Yoga & Yoga Therapy

WORK-EXCHANGE SCHOLARSHIP REQUIREMENTS (initial each line after reading/completing)

_____ I am requesting one work-exchange scholarship in the amount of \$2,375.00 to be applied to my 300-hour teacher training tuition.

_____ I understand this scholarship has no cash value and in the event I leave the teacher training program prior to its conclusion I will be owed **NO** money.

_____ I understand my paid tuition is non-refundable as of the day prior to the start date of the program.

_____ I understand my \$500 deposit, or any other amount paid to reserve my space in class, will be returned to me, less a \$250.00 service fee, if I withdraw from the program prior to two weeks before the start date of the program.

_____ I understand my \$500 deposit, or any other amount paid to reserve my space in class, is **NOT REFUNDABLE** if I withdraw from the program within two weeks of, or after, the start date of the program.

_____ I understand my \$100 application fee is non-refundable.

_____ I understand I may be removed from the 300YTT program and refused Certification if I do not complete my work-study hours, whether I have completed all program work or not.

_____ I understand that in return for this Scholarship I am dedicating myself to 6 hours of work/service per week for the duration of the 300 YTT (September 9, 2016 – April 11, 2017).

_____ I understand that work-exchange scholarship recipients may be requested to teach classes, work on the computer, in the gardens, clean the ashram, deliver flyers, help in the kitchen, paint, address the day to day maintenance needs of the ashram and I will perform all tasks with the highest positive intention.

_____ I understand that under this agreement I AM NOT ENTITLED TO any employee right, unemployment benefit, workers' compensation, vacation, insurance, or any other benefit whatsoever.

_____ I understand and acknowledge that I must fulfill the general requirements of the Kula Kamala Foundation 300-hour Yoga teacher training/Yoga Therapy Level 1 program in addition to any work-exchange scholarship requirements.

_____ I understand the ashram is an environment free of violence, smoke, alcohol, drug, and meat (including eggs).

_____ I agree to always conduct myself in a manner conducive to the mission of Kula Kamala



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Foundation and its intention to create and maintain a serene, sacred, supportive and welcoming environment for all practitioners and visitors.

_____ I agree to abide by the Yama and Niyama of Patanjali during this training to the best of my ability, including: Non-harming, truthfulness, non-stealing, awareness of the play of the senses and non-indulgence in harmful behaviors brought about by them, non-grasping, cleanliness, contentment, compassionate discipline, self study, and cultivation of a sense of honor, devotion and/or compassion.

_____ I agree to maintain a state of sobriety during this training.

I am available on the following days (please check all that apply)

- MON _____ Hours: _____
- TUES _____ Hours: _____
- WED _____ Hours: _____
- THURS _____ Hours: _____
- FRI _____ Hours: _____
- SAT _____ Hours: _____
- SUN _____ Hours: _____

Please email or drop this form by the ashram, together with your 300YTT program application and supporting documents.

Email: study@kulakamalafoundation.org

Supporting documents:

- 3 letters of reference
- copy of your 200YTT Certificate or active YA membership proof
- copy of your high school diploma or college transcript if available
- resume or CV

Signature: _____

Print Name: _____

Date: _____

Office memo:

RECEIVED BY: _____ ON _____