



## Ratna Ling Volunteer Program

**Please familiarize yourself with our residential volunteer program before applying. See [www.volunteer.ratnaling.org](http://www.volunteer.ratnaling.org)**

### Instructions:

- Please complete the entire application.
- **Resumes** are welcome
- When providing your **references**, please give both phone numbers and email addresses for all references. Four references are required -- at least 2 should be employment related, direct supervisor is preferred.
- Email your completed application to [volunteer@ratnaling.org](mailto:volunteer@ratnaling.org)

If you have questions, please email us at [volunteer@ratnaling.org](mailto:volunteer@ratnaling.org)

Thank you!

**Personal Information**

Today's Date:

Full Name:

Name you like to be called:

Phone #1 \_\_\_\_\_ Phone #2 \_\_\_\_\_

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

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

Current housing situation (own, rent, etc.) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_

I identify my gender as: \_\_\_\_\_

Marital Status:

Do you have any children or dependents? If so, please list ages and relationship to you:

Date you are available to begin volunteering:

How did you hear about our program?

Please list two people to contact in case of emergency:

Contact # 1

Contact #2

Relationship to you:

Name:

Address:

Phone:

**APPLICATION QUESTIONS**

1. Why would you like to be part of the Residential Volunteer Program? How do you see this experience fitting into your life right now?

2. How does your past work, schooling, or general background prepare you for our work and community life schedule?

3. Please describe how your individual goals and interests fit in with what you know of our community.

4. Describe any exposure you have had to Buddhism or other spiritual traditions. Knowledge of Buddhism or an interest in identifying as a Buddhist is not required. However, being interested in participating in a spiritually oriented community, respecting the traditions of others and preserving Tibetan culture is helpful.

5. Work in our community is variable. Do you have skills in any particular areas? i.e. cooking, IT, accounting, fundraising, maintenance, graphic design, sewing, office administration or any others?

6. What are your hobbies and/or interests? How do you spend your leisure time?

7. How does your family or how do those close to you feel about your interest in volunteering? Have you discussed this program with them?

8. Will you have any other obligations during the time that you are volunteering? Please include financial commitments, studies, medical treatments, etc.

9. How do you feel about living in a rural location?

10. Please include any other information about yourself that you would like to share.

## **EDUCATION**

### **Education history**

15. Please list institutions, dates attended, degrees, field(s) of study:

16. If you are taking a break from a college degree, please explain:

### **Employment History**

18. Please list all employers, dates employed, positions held or attach a resume.

### **REFERENCES**

19. Please list name, email, **and** phone number for 4 references. Indicate how long you have known each reference and their relationship to you. Include at least 2 employment/professional references. Volunteer-related and school references may be used.

## **HEALTH AND PERSONAL HISTORY**

*Answering the following questions helps our Volunteer Committee get to know you better. We do not discriminate against applicants based on answers to these questions, but look at the overall fit between potential volunteers and our program.*

20. Do you have health insurance? If yes, until what date? Most of our residential volunteers qualify for coverage through MediCal.

21. Do you have any chronic physical problems or health concerns? This could include chemical or environmental sensitivities, allergies, headaches, breathing sensitivities, shoulder, back or foot problems or pain, sensitive stomach, sleeping difficulties, etc.

22. Have you had any surgeries, major illnesses or injuries in the past? If so, please describe.

23. Do you have any food allergies or dietary restrictions? Please specify. We are not always able to accommodate special dietary needs, but are happy to try.

24. Are you taking any prescription or over-the-counter medication for any purpose?

25. Have you been under the care of a mental health professional or a therapist in the past or are you currently?

27. Have you ever been diagnosed with any mental/emotional health conditions or been prescribed treatment for those or related diagnoses? Please describe.

28. Have you ever had difficulty with abuse of or addiction to nicotine, alcohol, drugs or over-the-counter medications? Please describe.

29. Have you ever been convicted of a crime? Please describe.

30. Have you ever filed for bankruptcy? Please describe.

32. If you are from a foreign country, how long is your legal status in the U.S.

\*Please note that if accepted into the program, you will be asked to provide your Social Security and Driver's License number or your passport ID number upon arrival.

### **Travel & Logistics**

Do you own a car?

How do you intend to travel to Ratna Ling, if accepted?

**Sign below to indicate that you have provided complete and truthful answers to the questions above.**

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

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

Thank you for your interest in our residential volunteer program!