



**2016 Jivamukti Yoga Teacher Training**  
**\$1000 Scholarship Application**  
**Course #0826-490**  
**May 1-27, 2016**

**Dear Scholarship Applicant,**

Thank you for your interest in the Jivamukti Teacher Training at Omega Institute. **Please take the time to thoroughly read the following information before filling out your application.**

Omega is committed to helping people with limited finances and special needs attend its programs. Thanks to the generous support we receive from donors and from our own annual contributions, we are able to award a limited number of \$1000 scholarships to qualified applicants for this program.

**Scholarship Determination**

Please register for the Jivamukti Yoga Teacher Training and pay the minimum \$1500 tuition deposit and 50% of the housing fee that you choose. Then complete the enclosed application and brief personal essay. If you meet the income eligibility guidelines criteria, your application will be further evaluated based on personal need and/or professional commitment shown in your essay.

Scholarships are evaluated and awarded in the order received. Funding is limited, so please apply early and be sure to allow four weeks for processing. Only one scholarship per applicant per year will be awarded during each Rhinebeck campus season.

**Please Note:** The remaining balance for this training is **due by the cancellation date March 21, 2016**. After the cancellation date, there are no refunds for the tuition or housing for this program

Again, thank you for your interest. Your request is important to us and will be carefully considered. You will be notified by email of the status of your application

Sincerely,  
Omega Institute Scholarship Program

## 2016 Jivamukti Teacher Training SCHOLARSHIP APPLICATION

All questions (including essay) must be completed for this application to be valid. Please write legibly.

### **Applicant Information:**

Gender:      \_\_\_ Female      \_\_\_ Male      Self-Identify as: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (AM) \_\_\_\_\_ (PM) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Age (optional):       18-25     26-34     35-45     46-59     60-69     70 and over

Ethnicity (optional):     American Indian/Alaska native       Hispanic/Latino  
                                   Asian/Pacific Islander                     White/Caucasian  
                                   Black/African American                 Multi-ethnic  
                                   Other (please specify): \_\_\_\_\_

### **Household Income Eligibility**

<u>Household Size</u>	<u>To be eligible for a scholarship your maximum household income cannot exceed</u>
1	\$29,425
2	\$39,825
3	\$50,225
4	\$60,625
5	\$71,025

**Total Household Gross Annual Income** as reported on most recent tax forms: \$ \_\_\_\_\_

Total number of people in household (as shown on tax forms): \_\_\_\_\_

