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| **Nationality** |  | **Gender & Age** |  |
| **Name** |  | **Profession** |  |
| **What courses are you applying for?** |  | **Health History/****Physical Condition** |  |
| **Where do you come from and what is your economic situation in your country of origin? How do you generate income and what is your current occupation? Are you supporting yourself or can you get support from other sources (family, public social services, etc.)?** |  |
| **What is your background in Gong Fu/Tai Ji/Qi Gong, Daoism, Chinese Medicine ? What did you study in the past, for how long, with who, and what did it bring to your life ? Please provide videos or pictures of yourself training/practicing if you have any, as well as the links of the websites of the places where you studied, if available.**  |  |
| **What is your purpose for coming to study at the temple and what are your expectations of the temple?** |  |
| **How can you contribute to the temple? What skills do you have that could serve the temple?**  |  |
| **Student’s telephone number, E-mail and home address.**  |  | **Please submit to:**fiveimmortals@qq.comWith “Scholarship + Name of course you are applying for” in Subject line. |