

First name: _____
Last Name: _____
Email Address: _____



SCHOLARSHIP APPLICATION

Why are you interested in taking this course?

Please describe why you are seeking a scholarship.

How will receiving this scholarship be of benefit to you?

How will receiving this scholarship be of benefit to others?

This program involves making a commitment to your own meditation practice above all. You will be asked to meditate for short periods daily, as best you are able, and track the results and questions that arise. Are you willing and able to make such a commitment?

Will you be using this course to obtain CCEU's for ICF re-certification?

_____ Yes _____ No

How did you hear about this course?

_____ Open Heart Project website

_____ Open Heart Project email

_____ Facebook

_____ Instagram

_____ Current Meditation Instructor E- Course student. If so, please provide their name:

Other? _____

Thank you for your interest and we will get back to you soon!

Warmly, Susan and Jenna

(Please scan and email this completed form to: info@openheartproject.com)