



ISKCON New Vrindaban Inc. | 3759 McCrearys Ridge Road, Moundsville, WV 26041
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Attach passport
size photo here

APPLICATION FORM

Note: Everyone above age 15 is required to fill out the NV Admission form.
Any personal information disclosed on this admission form will be kept strictly confidential.
(NOTE: Please note that if incomplete information is given, this may be cause for rejection.)

Personal Information (Circle appropriate answers)

Legal Name: _____ Date: ____/____/____
Last First Middle (full)

Devotee Name: _____

DOB (mm/dd/yyyy): ____/____/____ SS#: ____ - ____ - ____ Gender: Male: ____ Female: ____

Address: _____
Street & Apt. # City State Zip Code Country

Phone: ____ - ____ - ____ Email: _____

Marital Status: Single: ____ Married: ____ Separated: ____ Divorced: ____ Cohabit: ____

Spouse's Legal Name: _____ Devotee Name: _____
Last First Middle

Number of Children, if any: ____ Who has custody? ____

Children's Names: (List on back if necessary) Age: Sex: Date of Birth mm/dd/yyyy

1. _____	_____	_____	____/____/____
2. _____	_____	_____	____/____/____
3. _____	_____	_____	____/____/____
4. _____	_____	_____	____/____/____
5. _____	_____	_____	____/____/____

Emergency Contacts

Legal Name (Last, First): _____

Devotee Name: _____ Relationship: _____

Phone: ____ - ____ - ____ Email: _____

Address: _____
Street & Apt. # City State Zip Code Country

Residency Information

Are you a U.S. citizen? **Yes:** ____/ **No:** ____ If No, what is your residency status? _____

What is your ID number? (Immigration # / Alien Registration #): _____ Passport #: _____

U.S. Driver's License No: _____ State: _____

Spiritual Background

Have you previously lived at New Vrindaban? **Yes:** ____ / **No:** ____

If yes, briefly state the reason for leaving: _____

Have you lived in another Krishna Temple before? **Yes:** ____ / **No:** ____

Where: _____ From: ____/____/____ To: ____/____/____

Where: _____ From: ____/____/____ To: ____/____/____ (add more on back)

Are you initiated in ISKCON? **Yes:** ____ / **No:** ____ Year initiated: ____

Are you an aspiring disciple? **Yes:** ____ / **No:** ____

Your spiritual master's name: _____ Your initiated name: _____

What are your current spiritual practices (sadhana) and commitment to spiritual life? _____

What is your past experience in devotional services (what services did you render)? _____

References

Please list name, address, phone number and email address of three references including a temple president (if you have recently lived in a temple). **Please note that if no references or incomplete information is given, this may be cause for rejection.**

Name: _____ Address: (City and State) _____

Phone: ____ - ____ - ____ Email: _____

Name: _____ Address: (City and State) _____

Phone: ____ - ____ - ____ Email: _____

Name: _____ Address: (City and State) _____

Phone: ____ - ____ - ____ Email: _____

Legal History

Have you ever been arrested? **Yes:** ____ / **No:** ____ If yes, were you convicted? **Yes:** ____ / **No:** ____

If yes, please explain in detail (use back of sheet if needed): _____

Are you now or have you ever been a Law Enforcement Officer in a local, county, state, or federal area, or worked for any government agency? **Yes:** ____ / **No:** ____

If yes, please give the agency name and dates of employment: _____

Do you have any weapons in your possession (guns, hunting bows, knives, etc.)? **Yes:** ____ / **No:** ____

Registration No.: _____ State: _____ Description: _____

Medical Conditions

Do you have any chronic health problems such as asthma, diabetes, heart condition, cancer, AIDS, or any known mental conditions (severe depression, bipolar, etc)? **Yes: ____/No: ____**

If yes, please give details: _____

Have you ever been in therapy? **Yes: ____ / No: ____**

If yes, please give details: _____

Do you now or have you ever in the past had any kind of substance abuse of any kind? **Yes: ____ / No: ____**

If yes, please give details: _____

Have you participated in any kind of treatment due to substance abuse? **Yes: ____ / No: ____**

If yes, please give details: _____

Have you ever had any contagious diseases? **Yes: ____ / No: ____**

If yes, please give details: _____

Are you currently under any type of medical attention? **Yes: ____ / No: ____**

If yes, please give details: _____

Are you currently taking any prescribed medication? **Yes: ____ / No: ____**

If yes, please give details: _____

Have you ever been tested for HIV? **Yes: ____ / No: ____**

If yes, date tested: ____/____/____ Result: _____

Are you willing to go through a physical examination (including HIV test) and take a drug test as a prerequisite for acceptance into the community? **Yes: ____ / No: ____**

Job Experience

Company: _____ Job Title: _____

Responsibilities: _____ Job From: ____/____/____ To: ____/____/____

Location: _____ Phone: ____ - ____ - ____ Supervisor: _____

Reason for leaving? _____ May we call for a reference? **Yes: ____/ No: ____**

Company: _____ Job Title: _____

Responsibilities: _____ Job From: ____/____/____ To: ____/____/____

Location: _____ Phone: ____ - ____ - ____ Supervisor: _____

Reason for leaving _____ May we call for a reference? **Yes: ____/ No: ____**

Company: _____ Job Title: _____

Responsibilities: _____ Job From: ____/____/____ To: ____/____/____

Location: _____ Phone: ____ - ____ - ____ Supervisor: _____

Reason for leaving? _____ May we call for a reference? **Yes: ____/ No: ____**

Education and Skills

Do you have a high school diploma? **Yes:** ____/ **No:** ____ Year Graduated: _____

School Name: _____ Location: _____

Do you have any college degrees, technical training, completed certificate programs, etc.? **Yes:** ____/ **No:** ____

If yes, please give details: _____

Please list any special skills, hobbies, languages (spoken), musical instruments played, etc.:

What types of service are you interested in performing at New Vrindaban Community?

Financial Information

Do you have any loans or debts, etc. over \$1,000? **Yes:** ____/ **No:** ____

If yes, please give details: _____

Please list any assets over \$300 that you are bringing into the community (eg: cash, computers, tools, cars, etc.):

Do you have any other financial responsibilities such as child support? **Yes:** ____/ **No:** ____

If yes, please give details: _____

Are you currently receiving any SSI, welfare, or government support? **Yes:** ____/ **No:** ____

If yes, please give details: _____

Do you currently work outside the community or receive any type of salary or paycheck? **Yes:** ____/ **No:** ____

If yes, please give details: _____

If you've answered no to **all** previous questions, please explain how you presently support yourself and your family:

Personal History

(Use back of page if not enough space)

Please write a short personal history telling about yourself and your spiritual life.

Explain the main reasons you would like to live in the spiritual community of New Vrindaban.

What do you see that you could contribute to New Vrindaban (list your talents and skills).

Do you have any expectations to receive anything besides room and board in exchange for your services?

Do you have any special needs? _____

ADDITIONAL PERSONAL INFORMATION). Please note that if incomplete information is given, this may be cause for rejection.

Please list your previous addresses for the last 7 years and time spent there. Use back of sheet if necessary:

Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To
Street	City	State	Zip	Date: From - To

Note: Upon review of your application, you may be interviewed by two or more devotees.

At New Vrindaban we are committed to excellence and we want everyone (guests, residents and managers) to have a wonderful experience. For these reasons, we reserve the right to make periodic reviews of residents to ascertain whether New Vrindaban is the right fit.

Upon preliminary acceptance, you will be given a one week trial. If that works you will progress from 1 month trial to 3 month trial to 6 month trial with periodic reviews after that.

Signature

Please read the following and then affix your signature in front of a witness.

I, _____ the undersigned, will not hold ISKCON New Vrindaban, Inc. or ECO-Vrindaban Inc. or any of their DBA's or members responsible for any kind of accident or injury that I may experience while visiting, living or volunteering in the community or serving as a part of any of its outreach programs.

- I hereby certify that the information that I have supplied is true and complete.
- I agree to follow all county, state, and federal laws as well as the rules and policies of the community.
- I understand that if I choose not to follow the community rules, I can be asked to vacate community property, and if that becomes necessary, I agree to readily comply with such request.
- I have asked to live in this community of my own free will and I am fully aware that I am free to leave at any time.
- I understand that I can be asked to relocate as needed, according to the discretion of New Vrindaban management boards.
- I hereby give permission to the Personnel Office and/or Management Board of New Vrindaban to have police and credit investigations performed as a condition of my acceptance as a member of the community, if necessary.

Signature: _____ Date: ____/____/____

Witness: _____ Date: ____/____/____

Office Use Only:

Reference checks made by: _____

1. Reference called: _____ Date: ____/____/____

Comments: _____

2. Reference called: _____ Date: ____/____/____

Comments: _____

3. Reference called: _____ Date: ____/____/____

Comments: _____

Background Check:

Date: ____/____/____

CPO Check: _____ Date: ____/____/____

Interviewed by a: _____ Date: ____/____/____ b. _____ Date: ____/____/____

Approved by: _____ Date: ____/____/____

Admitted on: ____/____/____ for the period of: _____ Conditions: _____