**Arsha Vidya Gurukulam**



**(Sruti Seva Trust)**

Anaikatti PO, Coimbatore, Tamilnadu 641 108 [www.arshavidya.in]

**Phone:** 91-422-2657001;E-mail:avgvedantacourse@gmail.com

**APPLICATION FORM FOR ONE YEAR RESIDENTIAL COURSE IN VEDANTA AND SANSKRIT FROM August 27, 2025 TO AUGUST 28, 2026.**

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| **A. Personal Information** | | | | | |
| Full Name: |  | |  | |  |
|  | Last | | First | |  |
| Gender  Present  Address: |  | | | | |
|  | | | | |
| City  State | | Country | Postal Code | |
| Main Phone |  | | Other Phone: | | |
| E-mail Address: | | | | | |
| Permanent Address: |  | | | | |
|  | | | | |
| City State | | Country | Postal Code | |
| Main phone : | | | Other Phone : | | |
| Date of Birth: Age: Marital Status:name of spouse if currently married | | | | | |
| Citizenship: | | | | | |
| Do you have dependents? If yes please give details | |  | | | |
| Will you support yourself financially (in terms of suggested donation of Rs. 10000 and personal expenses including medical expenses during the course)? | |  | | | |
| Do you have medical insurance? Please give the details. (on selection the medical insurance is compulsory and our office may help in case you need assistance) | |  | | | |

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| **B. Reference of non-relative individual(whom we may contact if necessary)** | | | | | |
| Full Name: |  | |  | | |
|  | *Last* | | *First* | | |
| Address: |  | | | | |
|  |  | | | | |
|  |  | |  | |  |
|  | *City* | | *Country* | | *Postal*  *Code* |
| Main Phone | Other Phone : | | | | |
| Email Address |  | Relationship: | |  | |

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| --- | --- | --- |
| **C. Education Information (include all qualifications beginning with College)** | | |
| 1. | Name & Location of college (last attended) |  |
| Name of Degree (last attained) |  |
| Year of completion of degree |  |
| 2. | Name & Location of college |  |
| Name of Degree |  |
| Year of completion of degree |  |

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| **D. Job Information (jobs in the last three years)** |
| How many years have you been working, including doing business, agriculture or voluntary work? Please describe nature of work and responsibilities.  1.Name & Place of last employment/work  Position  Nature of work  Period from….to…  2.Name & Place of employment/work  Position  Nature of work  Period from….to… |

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| **E. Language Skills** | |
| Can you communicate clearly in English? [Reading/Writing/Speaking]  What is your proficiency in English? | Reading :(a) Fair (b) Good (c) Fluent  Writing: (a) Fair (b) Good (c) Fluent  Speaking: (a) Fair (b) Good (c) Fluent |
| Other Languages you can read, write or speak. |  |

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| **Please indicate your background in the study of Sanskrit and vedanta from the options below:**   1. **Have you studied ‘Infant reader and Gita Sopanam' (please give details)** 2. **Have you studied any Upanishad with or without bhashyam under a teacher? (please give details)** |  |  |
| Any more information you would like to give regarding Sanskrit study… |  |  |

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| **F. Fitness and Stamina (Staying power)** | |
| All students are expected to participate in all the classes. Do you consider yourself fit and energetic to undergo a rigorous study of up to 6 classes along with seva of 1 hour a day. |  |

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| --- | --- |
| **G. Wellness Details** | |
| Full Name (of Applicant) |  |
| List all major or chronic illnesses you have presently or have had in the last three years. If any of them required hospitalisation, please give details, giving the type of illness, year and duration of stay in the hospital, etc  Also any physical challenge you may have in attending classes and doing seva.. |  |
| If you are currently under treatment for some medical condition like Hypertension, Diabetes, Heart Disease, etc., have any known allergies, or require some special Medical Care, special diet, etc., please give details. |  |
| Do you smoke? | Do you take alcoholic drinks? |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **H. Emergency Contact Information – Should be different from B above. Can be family relation or friend.** | | | | | | | |
| Full Name: |  | |  | | | |  |
|  | *Last* | | *First* | | | |  |
| Address: |  | | | | | | |
|  |  | | | | | | |
|  |  | | |  | |  | |
|  |  | | | Country | | Postal Code | |
| Main Phone: | Other Phone: | | | | | | |
| Email Address |  | Relationship | | |  | | |

**I. BRIEF BIOGRAPHICAL PROFILE - Answer each item separately**

1. Family background with a note on family members and the religious/spiritual background of the family if any.

2. Role of the family background in your spiritual pursuit

3. Do any of your family members, need or expect your presence or assistance during the period of the course?

4. Would your family support your joining this course?

5. What do you consider to be important values in life?

6. Have you been involved in any Seva activities like reaching out action, community service and voluntary work of any kind? If yes, please specify the activities and your role.

7. What do you consider to be your strengths and weaknesses with regard to your participation in the course.

8. Would you like to give any other information about yourself?

**J. STATEMENT OF PURPOSE – Answer each item separately.**

1. Goal of life –
2. How did you get Interest in spirituality –
3. Reason to study Vedanta –
4. Why at this time? –
5. Why study at Arsha Vidya Gurukulam, Anaikatti –
6. Role models in life –
7. Affiliation to any spiritual master/organization –
   1. Direct learning (in person)-
   2. Indirect learning (Online/recordings) (names of teachers and organisations)-
   3. Do you consider any teacher as your Guru?

Note: Above mentioned affiliation is not a prerequisite for selection.

1. Have you done any spiritual course of more than 1 month. If yes please give the details.
2. After this one year course, would you be interested in attending a follow-up one year course which may

be planned from Novemb 2026?

1. Description of your spiritual journey so far –
2. What do you expect to accomplish from the course?
3. Plans after the course –

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| --- | --- |
| Mention the Identity Proof that you are submitting, [Copy of Pan/Card or Voter’s ID card/  Passport] |  |

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| --- | --- |
| How did you come to know about this course?  Please specify. |  |

**I hereby apply for admission to *THE ONE YEAR COURSE 2025-26 AT* ARSHA VIDYA GURUKULAM, ANAIKATTI PO, COIMBATORE, TAMILNADU, INDIA, and declare that to the best of my knowledge, all of the above statements are correct. I agree to abide by all the rules and regulations of the Gurukulam and will accept all decisions of the Acharyas and Management of the Gurukulam pertaining to the course and my stay. I will be responsible for my safety and personal health, not the Gurukulam. I hereby submit a copy of my ID Proof along with this application*.* I do not expect any certificate from the Gurukulam for attending the course. I wish to join this course for inner growth and the vision of Vedanta.**

**Date:**

**Signature of Applicant:**

**Note :-** Please fill up the form completely and send it to [avgvedantacourse@gmail.com](mailto:avgvedantacourse@gmail.com) along with the scanned copy of your ID proof.