



CHINMAYA MISSION

TRINIDAD AND TOBAGO

#1 Swami Chinmayananda Drive, Calcutta Road #1, McBean Village, Couva. Trinidad.
Ph: +1-868-679-3652

Email: chinmayamissiontnt@gmail.com • Website: <https://trinidad.chinmayamission.com/>



APPLICATION FORM FOR VEDANTA COURSE 2025

Please complete via Google Form: <https://tinyurl.com/CMTT-VedantaCourse2025>

1. Name _____
(First Name) (Middle Name) (Last Name)
2. Date of Birth _____ Age _____
DD/MM/YYYY
3. Gender _____ **Affix
Photograph**
4. Marital Status _____
(Married/Single (Uncommitted)/Divorced)
5. Home Address _____

City/Village _____ Country _____
6. Present Address (if different from above) _____

7. Email Address _____ Mobile Number (_____) _____

8. Languages Known (1) To Read (2) To Write (3) To Speak

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. Educational Qualifications _____
Please attach a copy of your University Degree and other supporting documents

Qualification Level	University/School	Year	Main area(s) of study
High School			
University			
Post-Grad			
Other Qualifications			

10. Please list your Indoor and Outdoor Hobbies/Interests/Achievements _____

11. Oratorical Proficiency

a. At University Level _____

b. On Public Platforms _____

12. Family Details

- a. Number of younger brothers: _____ sisters: _____
- b. Number of elder brothers: _____ sisters: _____
- c. Father's age: _____ Profession: _____
- d. Mother's age: _____ Profession: _____

13. Are you employed? If yes, please list job title: _____

- a. If no, please state what you are doing otherwise: _____

14. Debts, if any: Family: _____ Personal: _____

15. **Personal Health History:** *We recommend that students with chronic health issues bring all medications if required. Please note that there is no residential qualified doctor at Chinmaya Ashram Trinidad for any severe medical issue; the nearest hospital is approximately 2 km away.*
Note: Please attach a Medical fitness/Full Physical report not older than three months from the date of submitting

Height: _____ ft _____ in Weight: _____ lbs

Do you take any medications regularly? If yes, give details: _____

16. History of Diseases for you or anyone in the family, if any:

- () Diabetes () Blood Pressure () Heart Issues
- () Chest (TB, Asthma, etc.) () Nutritional disorder () Thyroid
- () Neurological issues (headache, migraine, vertigo, epilepsy, etc.) () Skin diseases
- () Any Other Conditions, please specify, or give details of the above selection(s):

17. Details of specific (medical) treatment for any of the above-mentioned illnesses (or any other):

18. Details of any procedures/surgeries undergone, if any: _____

19. Any history of extreme fear, anxiety, adjustment difficulties, accidents, physical abuse or emotional stress? If yes, please explain:

20. Any history of depression (you or in your family?) () YES () NO

21. Have you completed and attached the results of the medical reports required from a reputed doctor/laboratory? () YES () NO

22. Have you previously been initiated into spiritual sadhana (training)?

23. If yes, give details of the spiritual sadhana you have been practising: _____

24. Are you associated with Chinmaya Mission? If yes, give details: _____

25. Are you associated with any other cultural or spiritual organization? If yes, give details:

a. Name of the Organization: _____

b. Address: _____

c. Name of your Guru (Teacher): _____

d. Type of Initiation: _____

26. Spiritual Studies

a. Spiritual books you have made an exhaustive study of: _____

b. Spiritual books you have inquisitively gone through: _____

27. Do you have any social work experience? Please give details: _____

28. Reason(s) to apply to the Vedanta Course (attach additional sheet if necessary): _____

29. What do you intend to do with the knowledge and training in spiritual subjects that you will receive (attach additional sheet if necessary)?:

30. **Interviews:** All applicants are required to attend an interview with Course Acharya, Swami Prakashananda ji, in-person at the Ashram if in Trinidad, or online if abroad. You will be contacted via email with a date and time for the interview.

a. Please choose which is most convenient for you to attend an interview:

() Chinmaya Mission Ashram, McBean Village, Couva

() Online Zoom Call (for applicants residing outside of Trinidad ONLY)

31. **References:** Please list Name, Job Title, Contact Info (phone number and email) and Relation of TWO (2) references (other than relatives):

a. Name (1): _____

b. Job Title: _____

c. Phone: _____

d. Email: _____

e. Relation: _____

f. Name (2): _____

g. Job Title: _____

h. Phone: _____

i. Email: _____

j. Relation: _____

32. Ensure that you have attached the following along with the completed Application Form:

- a. University Degree
- b. Medical fitness certificate/Full physical report

33. Completed applications should be uploaded and emailed to chinmayamissionnt@gmail.com at the earliest, no later than June 30, 2025.

DECLARATION

If admitted as a student, I will strictly follow the discipline of the institution and strive my best to prove myself worthy of your selection. I am personally motivated to undertake studies and I am not under any obligation or pressure from anyone.

In the event I have a pre-existing condition or a medical emergency whilst undertaking the Vedanta course, I agree that Chinmaya Mission (Trinidad and Tobago) will not bear any liability.

Location: _____

Print Name: _____ Signature: _____

Date: _____

(DD/MM/YYYY)