



A Residence for the Bhikkhuni Sangha in the US | 501.C3 Non-Profit Organization

## Application for Residency

Carolina Buddhist Vihara provides residence for Buddhist nuns. The facility is in a residential area of Mauldin, South Carolina. Currently, it has two rooms with one full bath and a washroom. A special project is underway to add another bedroom.

As facilities are limited, applicants for residency are required to:

- Support programs such as meditation and Sutta study classes
- Assist the senior resident nun(s)
- Perform other duties in and around the house
- Provide transportation for the nun(s) when they need to go out

The application will be reviewed by the resident monastics and the Board of Directors for the final decision. Resident applicants are expected to observe the eight precepts during their stay. Only females will be considered.

Please complete this application and email it to: [greenvillebv@gmail.com](mailto:greenvillebv@gmail.com)

### Application Form

**Date:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Are you a monastic?** \_\_\_\_\_

*If yes, please state ordination level and year of ordination*

**Email Address:** \_\_\_\_\_

**Physical Address:**

*Street:* \_\_\_\_\_, *City:* \_\_\_\_\_

*State:* \_\_\_\_\_ *Zip code:* \_\_\_\_\_ *Country:* \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Carolina Buddhist Vihara, 113 Woodridge Circle, Greenville SC 29607**

864-329-9961 | <https://carolinabuddhist.org>



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**Driver's License Information:**

*License Number:* \_\_\_\_\_

*Expiration Date:* \_\_\_\_\_

*State of Issuance:* \_\_\_\_\_

**Proposed Start Date of Residency:** \_\_\_\_\_

**Proposed End Date of Residency:** \_\_\_\_\_

**If you are not a Monastic, please explain about yourself** (such as, why you would like to reside at the Vihara, describe what study, formal or informal, meditative practice, and teachers you follow either monastic or lay):

**Physical conditions that might affect your residency:**

**Any pending legal or medical issues:**



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**Reference 1:**

*Name:* \_\_\_\_\_

*Email Address:* \_\_\_\_\_

**Reference 2:**

*Name:* \_\_\_\_\_

*Email Address:* \_\_\_\_\_

**Emergency Contact:**

*Name:* \_\_\_\_\_

*Relationship:* \_\_\_\_\_

*Phone Number:* \_\_\_\_\_

*Email Address:* \_\_\_\_\_

**Are you covered by health insurance?** \_\_\_\_\_

*If yes, please provide insurance company and policy information:*

**Allergies to food or medication:**

*Thank you for your interest in residing at Carolina Buddhist Vihara. We will review your application and contact you regarding our decision.*