



**Application Form for Healing Words
with Roi Gal Or and Karmit Even Zur**

**18:00pm Monday 18th September – noon Friday 6th October 2017
La Laguna Bolonia, Andalucia, Spain**

Please complete and email to admin@schoolofstorytelling.com
or send by post to: International School of Storytelling, Emerson College, Forest Row RH18 5JX

First Name _____ Family Name _____

Gender _____ Date of Birth (DD/MM/YY) _____ Nationality _____

Address _____

Post Code: _____ Country: _____

Tel: _____ Mobile _____ Email: _____

How did you hear about us? _____

Are you accompanied by a partner also studying at School of Storytelling or Emerson College? Yes ___ No ___

Name _____ Course _____

Emergency Contact Information

Contact Name _____ Relationship to you _____

Telephone (day) _____ Telephone (night) _____

What languages do they speak? _____

Address _____

Background Information

If you have not taken any previous courses with ISOS you will need to take Begin it Now before the course starts or demonstrate that you have prior experience of storytelling.

Is English your first language? Yes _____ No _____

If No, how would you describe your level of English? _____

Please answer to the following questions:

- What you expect to get out of the time you spend here?
- Is there anything you would like to tell us about yourself that might affect your ability to take this course?

- Describe your spiritual background, or acquaintance with Rudolf Steiner's work.
- Tell us a little more about your previous education and training (or attach CV)

Do you have any medical condition or special needs that could affect your time with us, including special diet, any disability, or physical or mental health issues?

Yes _____ No _____ If you answered 'yes', please tell us about it in your **letter**, above.

References

We require 2 referee letters to include connection/relationship with the applicant and comments on the applicant's suitability for the course. These should not be from relatives. Please ensure these are sent with this application or forwarded to us. Your application will NOT be considered without these documents.

Accommodation & Meals

Accommodation and Meals are available at **La Laguna Bolonia, Andalucia where the course is being held for 50 euros per night.**

You can find out more about the centre here <http://www.lalagunabolonia.com>

Tel: 0034 625 47 56 16

La Laguna are a separate organisation and you book directly with them.
To make a booking for accommodation and meals download and complete the application form on the ISOS website and follow the instructions.

Costs & Payment

Tuition fee for the course is £1060.

Early bird price is £960 if booked and paid in full by 1st may 2017.

A non refundable deposit of £ 318 is due as soon as you receive your acceptance of your application in order to secure your place on the course.

The balance of your tuition fee is due on or before 18th August 2017.

The whole amount is non refundable if you cancel after this date.

If you have any problems at all with paying your balance by this date, please contact us very promptly or you may lose your place on the course.

Declaration

I am willing to commit myself to the work and structure of the course, and to contributing to the community life at La Laguna. I understand that the habitual use of drugs and alcohol are incompatible with the aims of the course.

Signature _____ Date _____

Have you enclosed the following?

Signed application form

2 referee letters

Medical Report

Background Information letter

2 passport size photographs

Photocopy of your passport to include passport number, date of issue, expiry and place of issue

Discount application (if applicable)

Your application cannot be considered until all the documents are received.

Thank you for your application.

We will confirm receipt of your application as soon as we receive it and let you know whether you have been accepted on the course within one month of receiving all your documents.

Please contact us if you do not hear from us within one month of us receiving your full application pack.

All information will be sent out by email if possible in order to save paper.

We are not able to consider your application until ALL the documents are received.

Medical Report

The medical report should be completed by a qualified doctor, preferably the applicant's own physician.

Please return to us with your application form.

All information will be treated as strictly confidential and only disclosed to the person assessing your application.

Your application will not be assessed until this document is received.

PLEASE USE BLOCK LETTERS

Name of Applicant _____

General state of physical health _____

General state of mental health _____

Is the applicant currently receiving treatment for any physical or mental conditions? If so, please give details

Please give a brief medical history (continue on separate sheet if necessary) _____

I have known this person for _____ months/years

Name of doctor: _____ Signature: _____ Date _____

Address, telephone: _____

(Doctor's stamp)