

# Spiritual Paths Institute - Application

Application for Admission: Thank you for your interest in the two-year program in InterSpiritual Wisdom. Below you will find instructions as well as an application form to be completed and submitted online. (If you wish to apply via paper and US mail, please contact us for application materials.) Required fields are indicated with an asterisk (\*).

- Planned Enrollment Start (MM/DD/YY) \* : \_\_\_\_\_
- Student Level \* (circle one): Auditor    Certificate    Advanced
- **Student Information**
- Last Name \* : \_\_\_\_\_
- First Name \* : \_\_\_\_\_
- Middle Name \* : \_\_\_\_\_
- Preferred Name (if different): \_\_\_\_\_
- Previous Name (that might appear on transcripts): \_\_\_\_\_
- Address \*  
Street Address: \_\_\_\_\_  
Address Line 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State / Province / Region: \_\_\_\_\_  
Postal / Zip Code: \_\_\_\_\_  
Country: \_\_\_\_\_
- Residency (if not a US Citizen): \_\_\_\_\_
- Citizenship: \_\_\_\_\_
- Day Phone \* - (###) - ### ####: \_\_\_\_\_
- Evening Phone - (###) - ### ####: \_\_\_\_\_
- Cell Phone - (###) - ### ####: \_\_\_\_\_

- Fax Number - (###) - ### ####: \_\_\_\_\_
- \_\_\_\_\_
- Email \*: \_\_\_\_\_
- Social Security Number \*: \_\_\_\_\_
- Date of Birth \*: \_\_\_\_\_
- **List All Colleges and Universities Attended**

College/University	Dates Attended	Degree Received

- **For Statistical Purposes Only**
- Gender \* (circle one): Male / Female
- Marital Status \*: \_\_\_\_\_
- Ethnicity \*: \_\_\_\_\_
- Race \*: \_\_\_\_\_
- Nationality \*: \_\_\_\_\_
- Special Needs (please describe): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- How did you hear about the Spiritual Paths Institute? \*: \_\_\_\_\_  
 \_\_\_\_\_

- Application Check List - After completing this form, please remember to send in the following materials to complete your application:
  1. A personal photo
  2. Current resume or curriculum vitae
  3. Spiritual autobiography (5 pgs. for Certificate, 2 pgs. for Auditor)
  4. One letter of recommendation
  5. Non-refundable \$75 application fee
  
- I certify the above information provided is complete and correct to the best of my knowledge. \*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- **Further Instructions**

If you wish to send your application via regular mail, please contact us at [admissions@spiritualpaths.net](mailto:admissions@spiritualpaths.net) or call 805 695-0104.

Please mail all additional application materials to the address below and identify each with your name and program for which you are applying. All written work should be typewritten and double-spaced. No portion of the application will be returned regardless of the acceptance outcome.

Please mail application, check and all materials to:  
Spiritual Paths Institute  
6 Harbor Way # 149  
Santa Barbara, CA 93109

Phone: 805 695-0104, Fax: 805 695-0104, Email: [admissions@spiritualpaths.net](mailto:admissions@spiritualpaths.net),

Web: [www.spiritualpaths.net](http://www.spiritualpaths.net)