



Please make sure you complete the following, then sign and date it when all the steps have been completed.

1. I have read the Sabbatical program information and I believe I qualify for participation. I am applying for the Sabbatical to be held: (please check appropriate Spring or Fall session and the year).

January 1 - February 12, 2017      March 19- April 30, 2017      July 16-August 27, 2017

2. A registration fee of \$\_\_\_ is to accompany this form. This fee is only refundable if the application is not accepted.
3. Please write a 1– 2 paged, typed (double spaced) autobiography, including your reasons for wishing to complete a Sabbatical Program.
4. Enclose with application form, two letters of recommendation: one from your Provincial/ Congregational Superior/Bishop/Priest/Pastor/Spiritual Director and one from another person who knows you quite well. Please have these letters sent, at your earliest convenience to:

**Admissions, at the address below.**

5. Also enclose a recent and thorough medical examination.
6. Attach to application form a recent photograph of yourself for identification purposes.

Total payment for the Sabbatical is \$4500.00. (USD) You will be notified regarding your acceptance. At that point, you are asked to send a check in the amount of \$\_\_\_\_\_ to keep your place. The balance must be paid no later than \_\_\_\_\_.

**Please have all payments made in U.S. dollars. Thank you.**  
Make checks payable: WVIS or The West Virginia Institute for Spirituality  
Credit card payments: contact WVIS at 304-345-0926  
Paypal/Square Cash also accepted.

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Signed

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Date

**The West Virginia Institute for Spirituality 1601 Virginia Street, East Charleston, WV 25311**  
**Phone: 304-345-0926 Fax: 304-345-8208 Email: wviscr@aol.com (Sister Carole Riley, CDP, PhD)**  
**Payment questions: wvisreg@aol.com or 304-345-0926**  
**Website: wvis.org Facebook: The West Virginia Institute for Spirituality**