



Illinois Vipassana Center-Dhamma Pakāsa

10076 Fish Hatchery Rd, Pecatonica, IL 61063 Ph.: 815-489-0420 - Fax: 360-283-7068 - E-mail: childrens-courses@pakasa.dhamma.org
www.pakasa.dhamma.org

Dear Old Student,

Thank you for your interest in serving during a children's or teens' course.

Included in this packet are the **Children's and Teens' Course Safety** Guidelines, an **application form** for Dhamma service and the **Dhamma Workers' Disclosure and Authorization Form** for Background Checks.

Please read BOTH the Safety Guidelines AND the Code of Conduct for Dhamma **Workers** before filling out your application form.

You can read the Code of Conduct for Dhamma Workers online at www.dhamma.org/en/dscode.shtml or contact the center to request a copy by mail or fax.

Please fill out and sign these three documents.

1. The Children's and Teen's Course Safety Guidelines,
2. your application form, and
3. the Dhamma Workers' Disclosure and Authorization Form for Background Checks.

Please fax, email or mail all forms to

Fax: 360-283-7068

Email: childrens-courses@pakasa.dhamma.org

Mail: Illinois Vipassana Meditation Center, 10076 Fish Hatchery Rd, Pecatonica, IL 61063

We will let you know once your application has been accepted or if we have further questions.

With best wishes,

The Children's and Teens' Courses Committee

(OVER)



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Children's and Teens' Course Safety Guidelines

These "Children's and Teens' Course Safety Guidelines" are set within the context of the "Dhamma Workers Code of Discipline" and should be followed with the same diligence to protect and preserve all participants during a children's or teens' course, as well as to preserve and protect the purity of the course and center atmosphere.

The Code of Discipline

The principles set out in the "Code of Discipline" have been produced to ensure a peaceful, harmonious atmosphere during courses, conducive for all (children, teens and adults) to meditate.

The basis of the code of discipline is the five precepts that anyone of any age at a course or center are asked to follow:

- not to kill
- not to steal
- not to commit sexual misconduct
- not to lie
- not to take intoxicants

The goal of the following guidelines is to further ensure the welfare of children and teens while at a children's or teens' course at either a center or non-center site and to insure that any suspicions of abuse or inappropriate conduct are responded to efficiently and effectively.

Guidance for Servers on Children's and Teens' Courses

Contact with Children

- Any one-to-one work with children should be done in full view of others.
- All responsibilities involving the custodial care of children (e.g., contact in private or semi-private areas such as bedrooms and bathrooms) should be done in full view of others, and/or in pairs of adults.
- If in exceptional circumstances one-to-one contact cannot be avoided in more private areas, others should know about and support your actions (i.e., telling people before and after the event).
- Groups of children (three to six in number) should be attended to by assigned group leaders who are responsible for their care. However, in sleeping arrangements, adult group leaders should stay in a neighboring room whenever possible. If adult group leaders must sleep in the same room as the children, then the adults should only do so in pairs, not singly.



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- In this Vipassana tradition, people are asked to refrain from physical contact with any other person while at meditation centers or during courses. However, it may sometimes be inevitable that physical contact between servers and children is required, such as when a child is injured or sick. Servers should ensure that any contact is for the benefit of the child and not the server and is not open to any misunderstanding.

Confidentiality

- Any information about children, such as contact details and other background information, problems and issues on a course, dietary requirements and medical needs should be kept confidential and shared only with others on a need-to-know basis.

Harm to Children

- Should there be a suspicion or an accusation that any inappropriate conduct or harm (physical, sexual or emotional) has been done to a child while on a children's or teens' course, either as a result of an action by a server or another child then the conducting CCT must be informed as soon as possible, 24 hours at the latest, (and notes made about what happened). The CCT should then take appropriate action which may involve informing the relevant civil authorities, and the Area Teachers responsible for the center.

I understand and will follow the guidelines outlined and described in this document.

Signed: _____ Date: _____

Print name: _____



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Children's or Teenagers' Course Application Form for Dhamma Workers

Dates of Course: From: _____ To: _____

Please complete this form, return it to the above address, and await confirmation. Please answer all questions fully. **All information will be kept strictly confidential.**

Name: First (Given) _____ Last (Family) _____		Phone: Home () _____ Work () _____ Fax () _____
Street Address/P.O. Box _____		Gender: M <input type="checkbox"/> F <input type="checkbox"/> Age: _____
City _____	State/Province _____ Zip/Postal Code _____	Date of Birth: Yr _____/Mo _____/Day _____
Country _____		Occupation _____
E-mail Address _____		

Please give details of your courses with S.N. Goenka or any of his assistant teachers:

Date	Location	Teacher(s)
First Course: _____	_____	_____
Most Recent Full Course (Sat): _____	_____	_____
Total Number of 10-day courses: Sat Full Time _____ Served Full Time _____		
Others Sat: _____	Others Served: _____	
Number of Children's Courses Served: _____	Please give details of the most recent one below:	
Date _____	Location _____	Teacher _____ Your Role _____

- Have you practiced any other meditation techniques (including other Vipassana techniques) or therapeutic or healing techniques since your last course with S.N. Goenka or one of his assistant teachers? Yes No
 - If yes, please give details: _____
 - Do you teach or practice on others? Yes No If yes, please give details: _____
- Have you maintained your practice of Vipassana meditation since your last course?
- Have you maintained the five precepts since your last course? Yes No If no, please explain: _____

Have you ever been convicted of a crime involving physical abuse or sexual misconduct? No Yes If yes, please give details: _____



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Have you ever been the subject of an investigation regarding physical abuse or sexual misconduct? No Yes If yes, please give details:

Details of any employment or life experiences you may have had working with children/teenagers:

Do you have any physical health problems, medical conditions or diseases?

No Yes If yes, please give details (dates, symptoms, duration, treatment, present condition).

Do you have, or have you ever had, any mental health problems such as significant depression or anxiety, panic attacks, manic depression, schizophrenia, etc?

No Yes If yes, please give details (dates, symptoms, duration, hospitalization, treatment, present condition).

Are you now taking, or have you taken within the last two years, any prescribed medication?

No Yes If yes, please give details (dates, types, dosage, present use).

Are you now taking, or have you taken within the past two years, any alcohol or drugs (such as marijuana, amphetamines, barbiturates, cocaine, heroin, or other intoxicants)?

No Yes If yes, please give details (dates, types, amounts, treatment, present use).



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I acknowledge that I have carefully read and understood the “*Code of Conduct for Dhamma Workers*”, and “*Children’s and Teens’ Course Safety Guidelines*” and I agree to abide by all the rules and regulations while I am at the Center.

I hereby certify that the above information is true to the best of my knowledge.

Signature

Date

Check here if you are driving to the course and willing to be contacted by others seeking a ride:



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Dhamma Workers' Disclosure and Authorization Form for Background Checks

In connection with your request to serve at Illinois Vipassana Meditation Center, Dhamma Pakasa, (the "Center"), the Center may wish to conduct a check of your background, as part of the process of considering your qualifications to serve.

The information below is required to conduct the necessary background check:

Full Name: (Please print legibly) _____
(First Name) (Middle Initial) (Last Name)

Current Address: _____

City/State/Zip: _____

Prior States of Residence (last 5 years):

Date of Birth: _____

Government Issued Identification:

Type of ID _____
(driver's license, passport, etc.)

Number _____

Name as it appears on ID _____

By signing below, you authorize the Center to use the foregoing information to conduct any necessary background checks and obtain any necessary background reports:

Signature: _____

Printed Name: _____

Dated