



QUANTUM
A C T I V I S M
V I S H W A L A Y A M

**QUANTUM ACTIVISM VISHWALAYAM
APPLICATION FOR ADMISSION**

MATRICULATION INFORMATION

To which of the following programs are you applying (check all that apply):

___ Two-year Master's Program in the Quantum Science of Health, Prosperity, and Happiness

___ Three to Five-year PhD program in the Quantum Science of Health, Prosperity, and Happiness (only master's degree recipients may apply)

To which term are you applying?

___ Fall 2020 semester beginning August 1, 2020 and continuing through January 15, 2021; The Fall 2020 term is entirely online – courses are available for access through Quantum Academy of Brazil

___ Spring 2021 semester beginning on December 1, 2020 for new matriculants (will commence for new students with online education for the term's first six weeks); semester begins on January 29, 2021 for returning students; semester concludes on July 15, 2021

PERSONAL INFORMATION

Legal Name: Last _____ First _____ Middle _____ Suffix _____

Date of Birth: Month ____ Day ____ Year ____

Sex: Male ____ Female ____

Preferred Name: _____

Email Address: _____

Permanent Address: _____
Street Address **Apt. #**

City/Town **State/Province** **Country** **Zip/Postal Code**

Phone: _____
Begin with Area or Country Code

Current Mailing Address:

P.O. Box or Street Address **Apt. #**

City/Town **State/Province** **Country** **Zip/Postal Code**

CITIZENSHIP

Argentina _____

Brazil _____

Canada _____

Czech Republic _____

India _____

Mexico _____

US _____

Other _____

ACADEMIC INFORMATION

Please provide copies of all college/university transcripts and send them to the attention of the Admissions Board via email to: info@amitgoswami.org. Your transcripts should accompany this application.

Institution of Higher Learning: _____

Degrees Earned (bachelor's):

Institution of Higher Learning: _____

Degrees Earned (master's or other advanced degrees):

EMPLOYMENT/VOLUNTEER INFORMATION

Applicants must provide a professional resume and send it to the attention of the Admissions Board via email to: info@amitgoswami.org. Your resume or vita should accompany this application.

Most Recent Place of Employment: _____

Dates of Employment: _____

Position Title: _____

ADDITIONAL INFORMATION

If you have additional information that was not requested in this application, feel free to include it here:

AUTHORIZATION

Your signature below confirms that all information in this application (including supplementary information) is factually true and honestly presented and that you are the person submitting this application.

Signature: _____

Date: _____

Please review the following to ensure that your application packet is complete:

Confirm that your application is legible and complete. Submit the application via email to info@amitgoswami.org to the attention of the Admissions Board along with the following documents:

1. Professional resume or vita;
2. College or university transcripts confirming receipt of your bachelor's degree if applying for our master's program and a master's degree if applying to our PhD program;
3. Page one of the University of Technology application provided. Please affix your photo in the upper right-hand corner of the page. Page two of the application may be left blank;
4. A valid copy of your current passport; and
5. A personal statement of 500 words or less (optional).

Your application will be reviewed within one-week of its submission. All successful applicants will receive Letters of Admission shortly following a thorough review of their applications. If you are admitted, please confirm your acceptance of our admission offer at your earliest convenience.