

Default Question Block



Scholarship Residency (Faculty Community)Application

October 1-3, 2021

Mountain Valley Retreat Center, Harrisonburg, VA

Please provide the following information:

First Name

Last Name

E-id (e.g., madisojx)

Email (JMU preferred)

Please select your college:

- College of Arts & Letters
- College of Business (and affiliate programs)
- College of Education
- College of Health and Behavioral Studies
- College of Integrated Science and Engineering
- College of Science & Mathematics
- College of Visual and Performing Arts
- Libraries
- Division of Student Affairs
- The Graduate School
- University Studies

Honors College

Other (please indicate):

Please select your department from the list below. If your department is not listed, please click "Other" and then enter it below.

Please provide your department in the space below.

Please indicate your status:

Full-time Faculty

Part-time Faculty

Adjunct

Other

Describe the scholarship project you plan to work on during this retreat. (100 to 300 words).

In one to two sentences, please describe the JEDI (Justice, Equity, Diversity, and Inclusion) connection of the scholarly project.

Besides additional time or money, what challenges do you experience with your scholarship? (100-300 words).

What do you hope this retreat helps you achieve in renewing or revitalizing your work as a scholar? (100-300 words).

Describe your experiences and comfort level with contemplative practices (mindfulness meditation, tai chi, walking in nature, yoga, etc..)(100 to 300 words).

- A room or cabin will not be shared with other JMU faculty unless you are applying for this program jointly with another faculty member who has already agreed to share the room or cabin. Please note

that all VA state employees must be vaccinated or tested weekly for coronavirus. We will follow all CDC and government recommended safety measures during your stay.

Will you stay overnight? (Yes or No)

- Yes
- No

Do you prefer a single occupancy room?

- Yes
- No

Do you have a roommate in mind, jointly applying for this program? (Please share their name).

Can you make all sessions the entire 3 days?

- Yes
- No. Please explain

Please note and describe any dietary allergies or restrictions.

We strive to be as inclusive as possible. Do you have points of awareness, considerations, accommodations, or other special needs we should be aware of?

Do you have any concerns or questions regarding safety measures?



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