

## Default Question Block



### Scholarship Residency (Faculty Community) Application

Wed 3/5, 1 PM until Fri 5/17 12 PM

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).

Mountain Valley Retreat Center (3091 Ragtown Rd, Rockingham, VA 22802) is about 25 minutes from JMU Campus. Do you plan to commute to and from the retreat location each day?

- Yes, I will commute each day.
- No, I would like to stay overnight at the retreat center.

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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