

## Application for YES, Level Two Yoga Teacher Training

Name:

Email:

Home Address:

Home Phone:

Cell Phone:

How did you hear about the training? (Joyce Anue) (Julianne Rice) (Sundari Jensen) (Other)

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1. How long have you been teaching yoga?
2. How many classes (or privates) do you teach on a weekly basis?
3. What style do you teach?
4. Where have you studied yoga teacher training?
5. Which school did you complete certification with? And when?
6. How do you intend to use this course (i.e., personal growth, professional purposes, etc.)?
7. Are you interested in teaching yoga one-on-one?
8. Describe your professional background:
9. Describe your background as it relates to yoga; include primary teachers, specific training programs or style you practice. Include how often you practice and the length of time on average.
10. Do you currently have a meditation practice?
11. Describe any community or service work you have been or are currently involved in.
12. What course content (see curriculum description) is most important to you in this type of program?
13. What other qualities or aspects of a yoga training program are most important to you?
14. Do you have any special learning requirements?

Please return to: Sundari Jensen at [sundari@cscecenter.org](mailto:sundari@cscecenter.org) and to Joyce Anue at [joyceanue@yahoo.com](mailto:joyceanue@yahoo.com)