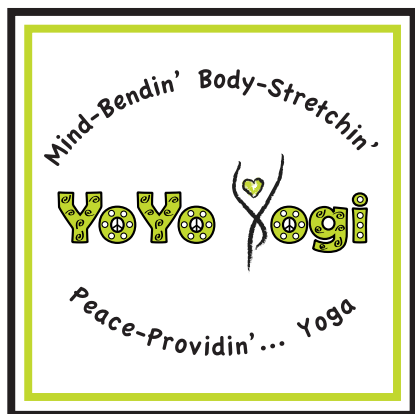


200 HOUR RYT

YOGA TEACHER TRAINING

Application

Please complete this application and return to:
YoYoYogi | 1306 NW Hoyt Street, Suite 101 | Portland OR 97209
Acceptance to the program will be based on a review of this application
and a 30 minute in-person or phone interview.



Personal Information:

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Date of Birth _____ Male ☐ Female ☐

Emergency Contact _____ Relation to you _____

Phone _____ Email _____

Yoga Experience:

How long have you been practicing yoga? _____

How often do you practice yoga? (Days per week - personal practice / class) _____

How long is your average practice? (hours per practice - personal / class) _____

What style of yoga do you typically practice? (List all that apply):

Besides yoga, please list any other types of physical activity you engage in and how often:

On a separate piece of paper please tell us:

1: Why do you want to be certified as a yoga teacher at this time in your life?

2: How do you plan to apply your yoga teaching skills to your life and work?



200 HOUR RYT
YOGA TEACHER TRAINING
Application Continued

Health Information

(please answer yes or no)

Are you under medical treatment for any physical condition? _____

Are you currently pregnant or trying to get pregnant? _____

Do you have any chronic pain, physical limitations, or disabilities? _____

Have you had a serious illness or major surgery within the last five years? _____

Do you have a communicable disease? _____

Are you under medical treatment for any psychiatric condition? _____

Have you ever been hospitalized for a psychiatric condition? _____

Are you in recovery from an addiction? _____

Have you ever been in a treatment program for alcohol or substance abuse? _____

Do you currently have or have you had any of the following conditions in your lifetime:

Environmental or food allergies _____ Respiratory conditions _____

Heart conditions _____ Diagnosed mental-health conditions _____

Seizures or strokes _____ Chemical sensitivities _____

Diabetes _____ High blood pressure _____

If you checked yes for any of the above questions, or if you have any other health condition that could impact your full participation in the program, please describe fully (if you need more space to answer this question, please attach additional sheets of paper): _____

List any prescription medications you are currently taking, indicating dosage and frequency of intake, and what symptoms/conditions require the medication. We do not need to know about birth control or cosmetic prescriptions. _____



YOGA TEACHER TRAINING

Application Continued

EDUCATION

Have you received a high school diploma or GED? _____

Please circle the highest level of college education (number of years): 1 2 3 4

Advanced degree (please describe): _____

Please list schools attended, dates, and degrees obtained: _____

Please list any body-centered trainings you have completed (e.g., massage therapy, dance, Pilates):

WORK

Current occupation _____ Number of years _____

Criminal Background

Have you ever been charged with or convicted of a felony or a lesser crime? _____

Have you ever been incarcerated? _____

If yes, please explain: _____

Certification Criteria

Although the great majority of students who attend the 200-hour certification program will be certified as Yoga Teachers, certification will not be granted to any student who fails to demonstrate the following:

1. A basic understanding of the yoga principles as well as specific philosophies, teachings, techniques, and methodology essential to the YoYoYogi approach.
2. Competency in the full range of practical skills required to safely teach Yoga to others.
3. A level of emotional maturity, mental stability, and personal integrity sufficient to create and maintain a safe and sacred environment that allows the personal transformation of students to occur.
4. The ability to be a yoga teacher, including the good judgment required to interact with students in a professional manner that safely and effectively brings them the benefits of Yoga, as reflected in the student's conduct inside and outside of class during the course of the training.
5. Attendance of required sessions, completion of all self-study coursework and maintaining the required weekly practice.

I acknowledge that all information submitted in this application is true and accurate. I understand that incomplete or inaccurate information may result in my non-acceptance or dismissal from the program. I acknowledge that I have read and agree with the certification criteria listed above, and, understand understand my responsibilities as a student.

Name

Date