



teacher training application

part 1: personal information

Name _____ Date _____

Address _____

_____ Zip _____

Phone _____

Email _____

Emergency Contact (name & number) _____

Do you have chronic or recent pain or history of surgery in any of the following areas? Please circle: Abdomen

Feet Ankles Knees Hips Low back Midback Upper back Neck Shoulders Elbows Wrists Hands

Any other current health concerns or recent surgery? _____

Degrees/Educational Background _____

Profession _____

How did you hear about this training? _____

part 2: yoga information

How long have you been practicing yoga? _____

Are you currently teaching yoga? If so, for how long, with what regularity, in what style? _____

What experiences have you had with styles of yoga other than Anusara? Attach separate sheet if necessary.

Attach a separate sheet to answer the following:

What has yoga meant to you?

Why do you want to teach yoga?

What skills and talents do you feel you would bring to being a yoga teacher?

Please describe your home practice of asana, pranayama, and meditation.

