



APPLICATION FOR 200-HOUR TEACHER CERTIFICATION

Please Print Clearly

Full Name: _____ Male: _____ Female: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Date of Birth: _____ Current Profession: _____

On a separate sheet, please answer briefly the following questions:

1. When did you begin to study hatha yoga?
2. What yoga classes and workshops have you attended in the last two years?
(Please include the tradition or style of your training, and approximate hours per week.)
3. Describe your personal practice; how often do you practice, and for how long?
4. Provide any details of previous yoga teacher training you have received.
5. Describe any previous experience you have teaching hatha yoga.
6. How does yoga affect your life?
7. Why do you wish to pursue certification?

One written reference/evaluation is required for the 200-hour program. Please use the reference form provided with this application.

Please sign this form and return it with your application fee of \$108 (non-refundable). Please include a passport-sized photo; your photo allows us to establish a relationship with you prior to your arrival, and is not used in our screening process. You may also submit a resumé or C.V. with your application. Return all application materials with your payment to: Synergy Yoga Studio, 11000 Three Chopt Road, Suite G, Richmond, VA 23233.

I understand that acceptance for admission to this program is based upon assessment of my general qualifications, and application materials, and that the admission decision is at the sole discretion of Synergy Yoga Studio and its affiliates.

Signature: _____ Date: _____

Payment: \$108 non-refundable application fee OR prepay total program fee of \$3,300.

Check is enclosed Visa Master Card Amount: \$ _____

Credit Card #: _____ Expiration Date: _____

Security Code: _____ Signature: _____ Date: _____



REFERENCE FORM FOR 200-HOUR YOGA TEACHER CERTIFICATION PROGRAM

Applicants to the hatha yoga teacher training 200-hour certification program are required to submit a reference from an individual who has personal and extensive knowledge of the applicant's hatha yoga experience, and fitness for completing the program. Your input regarding this applicant will better enable Synergy to evaluate his/her qualifications. You may use additional sheets if necessary.

NAME OF APPLICANT FOR WHOM YOU ARE PROVIDING THIS REFERENCE:

In what capacity do you know this applicant, and for how long? _____

How long has this applicant been attending your yoga classes? _____

How consistently does this applicant practice/attend yoga classes? _____

Rank this applicant's sincerity towards his/her yoga practice:

(Least) 1 2 3 4 5 6 7 8 9 10 (Most)

Rank this applicant's proficiency in yoga:

(Least) 1 2 3 4 5 6 7 8 9 10 (Most)

Rate this applicant's overall readiness to become a yoga teacher and/or commit to this program through to its completion:

(Not ready) 1 2 3 4 5 6 7 8 9 10 (Well prepared)

Please provide any additional comments you wish to add on the back of this form. We would greatly appreciate your candid and original comments and observations.

Name of yoga teacher providing reference: _____

Address: _____ Phone: _____

Signature: _____ Date: _____