

Yoga Flow Studio's 300 Hour Advanced Teacher Training Program Application

“ This training will be the first high caliber of it's kind on Long Island. It is meant for serious and dedicated teachers and students of yoga who want to take their knowledge and skills to the next level.



(Please enclose \$10 application fee)

Name: _____

Address: _____

City _____ State _____ Zip code _____

Phone # cell: _____ home: _____ other: _____

E-mail Address: _____

Emergency Contact: Name: _____ Phone #: _____

Relationship: _____

Website: _____

Questionnaire

(Please enclose \$10 application fee)

1) Are you currently teaching Yoga or have taught yoga?

Years of teaching: _____

Places you have taught: _____

2) Do you have an other current occupation/profession?

If yes, describe: _____

Previous occupations: _____

3) List previous teacher trainings and certifications: _____

Other yoga education/retreats etc. _____

4) How many years have you been studying /practicing yoga? _____

5) What are the Primary style/styles of yoga studied/practiced? _____

6) Who are your Primary teachers? _____

What other teachers have you studied with? _____

7) Please list any other Yoga related studies and interests: _____

8) What is your intention in taking this training? _____

9) Why are you interested in taking this teacher training program?

10) What particular areas of study are you interested in?

11) Do you have a current home yoga practice? (include asana, pranayama, meditation)? Describe:

If not, do you wish to start one?

12) Do you have any other spiritual practices? _____

13) Have you studied with a spiritual teacher? _____

14) What areas of philosophy and/or spiritual practice are you interested in? _____

15) What are your other hobbies and interests? _____

16) What areas in your yoga practice do you wish to strengthen?

17) What areas in your yoga teaching do you wish to improve? _____

18) What are your strengths? _____

19) Do you have any other goals for the future?

20) What type of learner are you? Auditory, visual, tactile? Other _____

21) Anything else you would like to share: _____

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