

Application

200 Hour Yoga Teacher Training with the Himalayan Institute Teachers Association

Complete this form and return it with an application fee of \$100 to:

Himalayan Institute of Pittsburgh
300 Beverly Road
Pittsburgh, PA 15216

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Work Phone _____

Email _____

Date of Birth _____

Profession _____

When did you begin to study hatha yoga?

What yoga classes, seminars and workshops have you attended in the past two years? Please include the following: In what tradition or style, at what level (e.g., beginning, intermediate, advanced), the frequency and approximate hours per week, the name of teacher, and if member of or trained by HITA.

Describe your own personal hatha practice. Include the frequency, duration, and length of time you been practicing hatha yoga.

List details of any previous yoga teachers training.

List and describe any hatha yoga teaching experience.

Briefly address each of the following questions:

How has yoga affected your life?

Why do you want to become a certified hatha yoga teacher?

List one reference and have them send a letter of reference directly to kate@hipyoga.org. Or they can mail it in to: HIP 300 Beverly Road, Pittsburgh, PA 15216. References should be from current hatha yoga instructors. Reference forms are included with this application, or are available by contacting HITA at the address listed below.

200 Hour Yoga Teacher Reference

Himalayan Institute Teachers Association

Applicants to the hatha yoga teachers training Certification Program are required to submit references from individuals who have personal knowledge of their hatha yoga experience. Your input regarding the applicant will enable us to better evaluate her/his qualifications. If more space is needed, please use the back of this form. When complete, please email to kate@hipyoga.org or send to HIP, 300 Beverly Road, Pittsburgh, PA 15216.

(Please print)

Name of applicant _____

Name of yoga teacher giving reference _____

Address _____

Phone number _____

Please respond to the questions below:

1) In what capacity have you known the applicant?

2) How long has the applicant been attending your yoga classes? _____

How often? _____

3) Rank the applicant's sincerity towards her or his practice of yoga:

1 2 3 4 5 6 7 8 9 10

Least

Most

Rank the applicant's proficiency in yoga:

1 2 3 4 5 6 7 8 9 10

Low

High

Rank the applicant's overall readiness to become a yoga teacher:

1 2 3 4 5 6 7 8 9 10

Not ready

Well prepared