

amrita: yoga teacher training application

amrita: a sanctuary for yoga
0110 sw bancroft st, portland, or 97239
po box 69065, portland, or 97239
503.552.YOGA(9642)
www.amritasanctuary.com
nikki@amritasanctuary.com
Sarahjoy Marsh, director
Nikki Perry, program manager

Name: _____

Address: _____

CITY STATE ZIP

Phones: _____

HOME WORK CELL

Email: _____

Date: _____

Office Use Only
acc/dec: _____
notified: _____
acc letter: _____

- Teacher Training program Immersion program

1. How long have you been practicing yoga? What kinds? _____

2. Have you practiced yoga at amrita? If yes, how long? _____

3. Any prior training or relevant training (ie. Massage school, PT, LAC, ND, Ayurveda)? _____

4. How many days a week do you have a home practice? What does it consist of (length of time, choice of asana)? _____

5. Have you taught yoga? For how long? In what capacity? Please list the dates, locations, levels, length of time for the class and the average class size. Include a separate sheet of paper.
6. Do you have a working knowledge of Anatomy/Physiology/Kinesiology or the Anusara Universal Principles of Alignment? _____

7. Do you have any injuries? _____

8. What will be the most challenging and rewarding aspects of teaching (or deepening your personal yoga practice)? _____

9. Please list the teachers you have studied with, for how long and what they brought to your practice, as well as what challenged you about their teaching. Include a separate sheet of paper. (Teacher, Length of Time, Gift, Challenge)