

CERTIFICATION FOR INDIVIDUALS

Individuals Application Form

This application is for individuals wishing to become YAI Certified Yoga Teachers and for experienced Teachers with no formal qualification wishing to gain YAI Certification under the 'Special Consideration' category.

Please read the information contained in this document carefully, print clearly and follow the instructions below. If you require assistance or clarification, please contact us by email: Europeyogaalliance@gmail.com . All information will be treated as confidential. Please remember to sign and date the last page of this form.

1) Fill in your personal details

Name: _____ Surname _____
Date of Birth: _____ Nationality: _____ Style taught: _____
Address: _____
City: _____ Province: _____ Postal code _____
Phone: _____ Fax: _____ Email: _____
Website: _____

Level of Certification requested: 200hour _____ 500hour _____

- A) If you have attended a teacher training course at a school that is certified by Yoga Alliance International go on to question **number 2**
(see our affiliated schools at: www.yogaallianceeurope.net or www.yogaalliance.in)
- B) If you are an experienced Yoga teacher without formal qualifications or have attended a teacher training course at a school that is not affiliated with Yoga Alliance International, please go to question **number 3**.

If you have substantial Yoga teaching experience (any styles or traditions) and Yoga studies, with a firm grasp of the philosophy that underpins your practice and your teaching and wish to gain a YAI Certificate, we look at each case individually under Special Consideration criteria. Please note that the process for this type of application is not always successful as we have strict rules in place in order to maintain high standard of safety and quality teaching for all.

2) Individuals who have attended a Teacher Training course with a Yoga Alliance International affiliated school, please follow the instructions:

Name of Certified School: _____
Level of certification: _____ Dates attended: _____
Total payment of 100 Euro may be made by bank transfer to the account found below.

Sri Meerambigai Garden, C.M. Chavady no.95, Near Le Ciel Homestay, Near Auroville Main
Road, Kottakupam, Villupuram, District 605104, Tamil Nadu, India

Tel: +91 9810670711 or 9818196716 Europeyogaalliance@gmail.com

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3) Individuals without formal qualifications and those who have attended a non-YAI school please fill out applicable answers:

Name of School: _____
Teacher Training course attended _____
Dates attended: _____ School director: _____
Website & email of Schools: _____
Teaching Experience: _____

Compulsory Documentation and fees

- Please send us your Yoga related CV and previous experience.
- Include a recommendation letter from your employer and/or Yoga Master.
- Submit a short account, of your Yoga teaching experience and why teaching yoga and being YAI Certified is important to you.

- Provide Copy or detailed description of your Yoga syllabus and diplomas (if applicable)
- Once, once you are notified that your documents have been reviewed by the panel and approved, you can send 380 euro fee for a life-time membership and certification by Yoga Alliance International.

All YAI Certificates are issued in India only after full payment has been received by YAI Bank in India. Payments are to be made directly to YAI, please see account information below:

Bank Account details.

SWIFT No: UCBAINBB001

Bombay Treasury Branch Account No: 0716647

Credit to: UCO Bank Account Number:90030110000571

Bank Account Name: Yoga Alliance International

Sri Aurobindo Ashram, Under Branch Office Hauz Khas, New Delhi - 110 016

Should you have further questions, please do not hesitate to contact YAI's European

Director Camille Gicquel at Europeyogaalliance@gmail.com

Declaration:

I have read and understood the requirements to apply for my Individual Certification and declare that the information provided in this application is true, and I understand that acceptance of my application is at the sole discretion of the YAI Committee. I also understand that if any aspect of this application is found to be false, incomplete or otherwise misleading, the application may be refused by YAI Committee.

Applicant's Name: _____ **Date:** _____

Applicant's signature : _____

PRIVACY STATEMENT

Yoga Alliance International acknowledges and respects the privacy of all individuals with whom it interacts. We advise that the information you are being asked to provide in this form is personal information as defined by the Commonwealth Privacy Amendment (Private Sector) Act 2000. This information is being collected for the primary purpose of recording your recommendation to purchase.

The personal information you have provided is not disclosed either by discussion or by record, to external persons or organizations or to unauthorized persons within Yoga Alliance International.

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