



## **APPLICATION FORM SCHOOL/TEACHER TRAINING PROVIDER**

### **YOGA ALLIANCE INTERNATIONAL SCHOOL CERTIFICATION and TEACHER TRAINING COURSE CERTIFICATION**

Applicants, please read the information contained in this document carefully, print clearly and return the completed form along with the required documentation to the following email address [Europeyogaalliance@gmail.com](mailto:Europeyogaalliance@gmail.com) . If you require assistance or clarification on any item, please contact us by email. All information will be treated as confidential.

#### **1) SCHOOL INFORMATION**

The following information will appear on our website upon approval.

School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Country \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Style of Yoga : \_\_\_\_\_

Description of Style: \_\_\_\_\_

Primary

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Affiliates or Additional Locations (additional charges)

If you wish to have additional branch locations certified, list each location:

School

Name: \_\_\_\_\_

Address:

\_\_\_\_\_

Country \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

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](mailto:Europeyogaalliance@gmail.com)

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## 2) FACULTY INFORMATION

### Primary Instructors

(1) Name: \_\_\_\_\_

(2) Name: \_\_\_\_\_

(3) Name: \_\_\_\_\_

(4) Name: \_\_\_\_\_

(5) Name: \_\_\_\_\_

### Other Faculty Members (non-certified teachers or guest speakers for anatomy, philosophy...)

(1) Name : \_\_\_\_\_

Subject taught: \_\_\_\_\_

(2) Name: \_\_\_\_\_

Subject taught: \_\_\_\_\_

## 3) TEACHER TRAINING COURSE INFORMATION (if your school is a TTC provider) :

**1. Level of Registration:** 200-hour \_\_\_\_\_ 500-hour \_\_\_\_\_ 200 & 500-hour \_\_\_\_\_

(If applying for both levels, please copy this application and submit one for each level.)

**2.** Does the primary Director of your YTT meet the registration criteria for the level he or she is directing?

Level (200-hours or 500-hours): \_\_\_\_\_

**3.** For 200-hour programs, the primary Director/ instructor:

Is Registered and Certified by \_\_\_\_\_ with at least 200 hours of teacher training.

Has been teaching yoga for at least two years? \_\_\_\_\_

Has taught at least 1,000 hours of yoga classes after graduating from YTT? \_\_\_\_\_

**4.** For 500-hour programs, the primary Director/ instructor :

Is Registered and Certified by \_\_\_\_\_ with at least 500 hours of teacher training.

Has been teaching yoga for at least four years? \_\_\_\_\_

Has taught at least 2,000 hours of yoga classes after graduating from YTT? \_\_\_\_\_

**5.** Do you issue a certificate to each graduate? If yes please attach copy.

#### **4) COMPULSORY DOCUMENTATION for SCHOOLS AND TTC PROVIDERS**

1. CVs for both the Director and the primary teacher.
2. Photocopies of relevant diplomas and certificates should be submitted.
3. Provide a brief history of your school and a short description of the style of yoga that your school provides.

#### **5) ADDITIONAL DOCUMENTATION FOR TEACHER TRAINING PROVIDERS**

1. Curriculum documentation of your TTC hours, including subject areas covered, and number of contact (face-to-face) and non-contact hours. See YAI Minimum **Required Standards** on our website page: <http://www.yogaallianceeurope.net>
2. Please attach advertising, brochures, or a catalog for your programs, if available.
3. Attach your school's logo as you would like it to appear on any future graduate's certification.

#### **6) YAI ASSESSMENT PROCEDURES:**

The assessment process involves review by the YAI committee and may take up to four weeks before Certification is granted. It may be necessary for the committee to ask questions about your application or to seek further clarification. If you fail to comply with our requests your application will be annulled. If the application is successful, upon receiving full payment we will courier your School's Certificate to you.

#### **7) YAI APPLICATION AND PROCESSING FEES:**

- **Once your School's application has been approved a 1000 Euro Certification fee is due.**
- All YAI Certificates are issued in India only after full payment has been received by YAI 's Bank in India. Please see bank 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**

## 8) CODE OF CONDUCT AND LEGAL ACCORD

This code of conduct is a statement of acceptable ethical and professional behavior by which all certified schools agree to abide by. It is not intended to replace the ethics of any school but is to be a basis for yoga principles. As a Certified Yoga School, I agree to follow these ethical principles:

- Conduct myself in a professional and ethical manner.
- Recognize the limitations of my skills and realm of practice and when appropriate, refer students to a specialized instructor.
- Respect the privacy and personal rights of all students while supporting diverseness by respecting students regardless of age, physical limitations, gender, ethnicity, sexual orientation or religion.
- Avoid words and actions that may be considered sexual harassment.
- Follow the traditional yoga principles as written in the Yamas and Niyamas.
- Follow all national and local laws that apply to my yoga teaching and business.
- Maintain a safe, comfortable, and clean environment for yoga practice.

I understand that YAI may revoke my school's privileges in case of failure to uphold the standards set forth in the above Code of Conduct. I swear that all information provided on this application is true to the best of my knowledge and that acceptance of my application is at the sole discretion of the YAI Committee. I consent to meet the above conditions in order to be listed as a Certified Yoga School and/ or Teacher Training provider with YAI. I understand that if any aspect of this application is found to be false or otherwise misleading, the application may be refused.

**Name of Applicant** \_\_\_\_\_ **Date:**

**Signature of Applicant** \_\_\_\_\_ **Date:**

Should you have further questions, please do not hesitate to contact YAI's European Director Camille Gicquel at: [Europeyogaalliance@gmail.com](mailto:Europeyogaalliance@gmail.com)

## 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 and, if appropriate, to notify you when the request is filled. The personal information you have provided is not disclosed either by discussion or by record to external persons or organizations.

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