

**Application for Yoga Teacher Training / Self Development Program in the tradition
of T Krishnamacharya and TKV Desikachar**

Name: _____ Birthdate: _____

Address: _____

Telephone: _____ Email: _____

Please answer the following on separate pages:

If you could take some time to reflect on and to distill the important elements of your yoga background and areas of interest. This will be of help in shaping the experience to meet your needs while drawing on your experience.

1. How long have you been practising yoga?
2. List your experience and /teacher(s) with their approach and give the dates/time of study.
3. Do you have a special area of interest as far as yoga studies and/ teaching?
4. Do you have your own personal practice?
5. If so, describe your own personal practice: frequency, time of day, length, content. Does this include pranayama, meditation, etc
6. Do you have specific problem areas in the body that need special attention or adaptation ? How do you approach these?
7. Have you had previous experience with this traditional approach? Give details
8. What would you like to gain through teacher development and continued studies?
9. Do you have a sense of your direction in yoga and in life over the next 1-5 years?
10. Is there anything further you would like to include?

Thank you!

Please call to book a private lesson, a pre-requisite for your application to be considered. Sheree Gurnell 902 886-2503 email: yogi@bellaliant.net

