

Namah Shivaya Jyoti Yoga, LLC

500 Hour Teacher Training Program Application and Agreement

First name _____

Last Name _____

Street address _____

City _____

State and Zip Code _____

Home phone _____

Cell Phone _____

E-mail _____

Work Phone _____

Occupation _____

Emergency Contact Phone Number _____

Instructions for Applying

Welcome to our Namah Shivaya Jyoti Yoga, LLC Teacher Training Program! Please read the entire application, initial the paragraphs in “Affirmations” and sign the Agreement below. Send the completed and signed application to info@namahshivayayoga.com, Attention: Teacher Training Program Coordinator. Once application is received we will contact you with acceptance then you will go online to pay deposit of \$200 which goes towards your tuition.

Please note that your deposit fee is non-refundable. Please submit your application as soon as possible to reserve your place in the Program. After receiving your application, the Program Director will contact you to review your application before making a final admissions decision.

Your Yoga Practice

How long have you been practicing yoga? Please provide a detailed description of your daily yoga practice.

Which postures do you practice during a typical session? Do you practice meditation? Do you practice pranayama?

What is your favorite style of yoga to practice and why is it your favorite?

What is most important to you in your yoga practice?

How has your involvement in yoga developed over time?

From a student's perspective, what qualities do you think make a great yoga teacher?

Name a yoga teacher that you admire and tell us why.

Why do you want to enter our teacher training Program at this time in your life?

What are your goals as a yoga teacher if you become certified?

Teaching Experience

Are you currently teaching yoga?

If yes, for how long?

What tradition or style?

How many classes per week?

Health Information

Are you currently taking any medications? If so what?

Are you or have you been under medical treatment for any physical or psychological condition?

Are you in recovery from addiction? If so, how long have you been in recovery?

Are you currently pregnant or trying to get pregnant?

Do you have any physical conditions or injuries? If so what?

Please discuss with Teacher Training Program Coordinator any medical condition that might affect your participating in the Program and practicing and teaching yoga. All information that you provide in this application, to the Program Director, or to any of the instructors will be held strictly confidential.

Tuition and Fees

The total tuition for the Program is \$2850 if paid in full by first day of class. There is a required \$200.00 deposit that is non-refundable. The \$200.00 deposit will go towards tuition. (Please initial next to the agreed upon plan)

_____ Pay in Full \$2650

_____ 14 Module Weekend Teacher Training monthly payment plan of \$205 per month for 14 months, will be due before the beginning of each month's weekend class.

Affirmations

In order to make an informed decision about your application to enter the Program, we must be able to rely on the truth and completeness of your information. You must answer all questions fully and honestly. If you are forced to leave the Program because of a health consideration, your opportunity to continue in another session is at the discretion of the Teaching Committee. By signing below, you affirm that the information provided in this application is true and complete.

If I am participating in the Program to become certified as a yoga teacher, I have carefully read the Certification Requirements and accept the requirements, conditions, and agreements expressed therein. I understand that the Teaching Committee may deny the opportunity to pursue certification to any student who it determines has not met the Certification Requirements in the exercise of its sole discretion. I understand that my failure to meet the criteria will result in my not being certified. Please initial here _____

I understand that providing inaccurate, incomplete, or misleading information is grounds for rejecting this application, being required to leave the Program after I have commenced participation, or the revocation of my certification after completing the Program. Please initial here _____

I have carefully read the Agreement and the Release of Liability and understand that the Studio is not responsible for any physical or psychological harm that may result from my participation in the Program. Please initial here _____

I have carefully read the Code of Ethics and understand that any violation of the Code of Ethics during the training could result in my not being certified and that any future violation of the Code of Ethics could result in the revocation of my certification. Please initial here _____

I have read and understand the refund policy set forth in Section 1 of the Agreement below. Please initial here _____.

I have read this document in its entirety, understand it and agree to honor it. I also understand that by signing the application below, I am agreeing to the Terms and Conditions

Print Name

Signature Date:

Office use only

_____ Date received _____ Application completed and signed _____ \$ _____ fee received _____ Date application approved or denied _____ Acceptance letter sent

(Don't Return this section with application, keep for your own records)

Namah Shivaya Jyoti Yoga, Teacher Training Program

Section 1. Refund Policy

The deposit of \$200 is non-refundable under any circumstances. If you cancel your participation in the Program no later than 1st day of the Program, Namah Shivaya Jyoti Yoga, LLC will provide you with a refund of the Program fee that you paid (less your deposit). After the 2nd day, no refunds will be given.

I understand that I am entitled to no refunds, credits, or adjustments resulting from my failure to complete or satisfy the certification requirements or to comply with the Code of Ethics in the event I am certified. I understand that the Studio is under no obligation to award any credit for past experience or training if I fail to complete the Program but may do so in the exercise of the sole discretion of the Teaching Committee (the "Committee").

Section 2. Teacher Training Certification Requirements

I recognize that the Program has been designed to provide yoga education for students who are pursuing certification by the Yoga Alliance and for those who wish to deepen their yoga practice without becoming a teacher.

For those students who are approved to pursue certification, 200/500 hour trainings, and successfully teaching your own class will make you eligible for approval for certification by the Program and the Yoga Alliance. Participation in all practice sessions is mandatory for certification. We require 100 percent attendance. If you need to miss any session you must speak to the Program Director prior to the session. You are responsible for any course material missed.

In addition, all students must possess the skills and abilities necessary to safely and competently teach yoga, and a high level of emotional and mental stability and maturity. Full participation in and completion of all course components is mandatory for certification.

For those students who are pursuing certification, the Committee reserves the right to withhold certification from any student who fails to develop and demonstrate the necessary skills, competencies, maturity and emotional stability necessary to safely and competently teach yoga. Any student denied certification has the right to seek the review of the Committee. The Committee will conduct a fair review of the situation and any determination of the Committee will be final.

You hereby agree to waive and release any Released Party from any and all claims, liabilities, damages, and expenses (including, without limitation legal fees and expenses) suffered by you as a result of any misstatements made by you in this Agreement, your failure to disclose any physical or psychological condition which may impair your ability to complete the Program, your failure to complete the Program or any reason or your participation in the Program.

“Released Party” shall mean the Studio and its owners, agents, representatives, employees, independent contractors, workshop presenters and teachers.

Subject to meeting all of the requirements for certification described above, certification will be granted when all payments and fees have been fully received by the Program. The Studio does not discriminate on the basis of race, color, religion, national origin, gender, age, marital status, disability, or sexual preference.

Section 3. Participation and Challenges

I understand the Program has been designed to create the optimal yoga education for the majority of students. I recognize that this Program has been designed to provide yoga education for students who are pursuing certification by the Yoga Alliance as well as those who wish to deepen their yoga practice.

During my participation in this Program, I am responsible for monitoring what is safe for me and I can stop my participation in any experience at any time. Although my attendance is required in each session to become certified as a 200/500 hour yoga teacher, I recognize my responsibility to speak up or take myself out of an experience if I feel unsafe. I do not, and will not hold, any Released Party responsible for my physical and psychological well-being.

The Program recognizes that the nature of yoga is to promote physical and psychological growth through which profound transformation can occur. It is your responsibility to do your best to uphold and foster a sacred, safe environment to foster transformation. It is important for you to possess a high degree of emotional maturity and personal integrity in order to serve and empower your students.

I understand that during the course of the Program, I will be challenged physically and psychologically and encouraged to take personal risks. I understand that practicing yoga is often about exploring new boundaries and limitations and that no Released Party is responsible for any physical and psychological risks that I may choose to take in connection with my participation in the Program. I understand that the study of yoga involves exploring and discussing different religious, personal and belief systems. These belief systems may be different from my own. I understand that the Program is not requiring me to change my beliefs in any way.

Section 4. The Code of Ethics If I become certified as a Studio yoga teacher, I agree to abide by the following Code of Ethics:

- Conduct myself in a professional and conscientious manner. This includes, but is not limited to, ensuring that I live up to any commitments I make to my students or to the public, and ensuring that my practices and behavior conform to the representations I make about myself in holding myself out as a yoga practitioner who adheres to certain precepts.
- Acknowledge the limitations of my skills and scope of practice and where appropriate, refer students to seek alternative instruction, advice, treatment or direction.
- Create and maintain a safe, clean and comfortable environment for the practice of yoga.

- Encourage diversity by respecting all students regardless of age, physical limitations, race, creed, gender, ethnicity, religion or sexual orientation.
- Respect the rights, dignity and privacy of all students.
- Avoid words and actions that constitute sexual harassment or harassment based on other legal protected characteristics.
- Adhere to the traditional yoga principles as written in the yamas and niyamas.
- Follow all local government and national laws that pertain to my yoga teaching and business.

Section 5. Revocation of Teaching Certification

Any complaint about the unethical behavior of a teacher who has been certified by the Studio's Program will result in a thorough and fair investigation by the Committee. This investigation will offer the opportunity for the teacher to present his or her statement of the facts and circumstances of the behavior. If the Committee finds that a teacher has violated the Code of Ethics, the certification may be revoked in the sole and complete discretion of the Committee.