



The Aquarian Teacher

Onyx Yoga Studio
45 Mountain Blvd.
Warren, NJ 07059

Kundalini Yoga and Meditation Teacher's Training Beginning October 21, 2017

Date:

Name:

Address:

City:

State:

Zip:

Phone:

Email:

Birthdate:

Place of Birth:

Former Professions:

Current Profession:

Educational Background:

How did you hear about the Yoga and Meditation Teacher's Training?

What is your current experience with yoga/meditation? Where have you practiced, with whom, and how long?

What has inspired you to become a yoga and meditation teacher?

What is your primary reason for wanting to become a teacher?

If you could write a vision of what you would like to see in the future for yourself as a teacher, what would it be?

What do you want to receive from your training program?

How do you feel about your own yoga and meditation practice?

Do you have a spiritual focus in life, or live by any discipline or practice? Please describe:

Have you participated in other trainings within the holistic health field, or spiritual realm? Please describe:

Please describe your current health:

Are there any health concerns that we should know about?

Have you had any experience with leading classes or teaching? If yes, please describe:

How do you feel about talking in front of groups of people?

Can you imagine yourself making a quantum leap in inner growth, and devoting a year to the study, practice, and discipline of an in depth teacher's training program?

Once certified, what areas of teaching do you see yourself interested in teaching?

Please name three people currently living who have been most inspirational to you spiritually and why?

Please describe your strengths as you currently see them:

If you are a parent, do you have reliable child care for evening/weekend classes?

Please give the names of two people not related to you, who are qualified to give a character reference. Please list names and phone number, or have them write a recommendation to the program, as to why they believe you would make an outstanding yoga and meditation teacher:

How do you expect to pay for the program?

Please sign and print your full legal name, along with the name you would like to be addressed:

Print Legal Name: _____ Called by Name: _____

Signature: _____ Date: _____

\$25. registration fee enclosed _____

A \$500. non-refundable deposit is required to hold your space which will go toward cost of the training

Best days and times for personal interview are:

Sat Naam and thank-you for your interest in teaching Kundalini Yoga and Meditation!