

Real Yoga

APPLICATION FORM for Yoga Therapy Post Graduate Diploma Course

The following are prerequisites in accessing a yoga therapy training in compliance with BCYT core curriculum:

- i) a yoga teaching qualification from training of a minimum of 200 hours and 180 contact hours (for example the 200 hours yoga alliance training)
- ii) teaching as a yoga teacher for a minimum of 120 hours over 1 year
- iii) continuous professional development, once qualified as a yoga teacher, of at least 15 hours per year
- iv) commitment to their own regular personal yoga practice for a minimum of 3 years

Name

Address

Telephone number

Email

Please detail your Yoga Training qualification and date qualified:

Please summarise the syllabus followed, or attach a separate sheet. Include course hours and timescale (i.e. 200 hours over 2 years)

Tell us whether you feel your course was basic, or more detailed on the following:

- Did your course cover the subtle energy system?
- Chakras, Vayus, Bandhas, Koshas?

What was the level of anatomy and physiology covered on your course?

- Musculo-skeletal only?
- All body systems?

Did your course include study of Yoga Philosophy?

- Bhagavad Gita
- Patanjali's Sutras
- Hatha Yoga Pradipika
- The Upanishads

Tell us about your teaching experience.

- How many years have you been teaching?
- How many classes do you teach?

Please give details of your experience of yoga classes you have attended /seminars attended, or if home practice, please give details of the programme you follow, books used etc. please use the reverse side if you need more space.

Do you have any other relevant training /qualifications, if so please provide details. For example, a complementary therapy training or medical training.

Do you have any Anatomy and Physiology/Pathology qualification or experience and if so to what level?

Say why you wish to join the course.

Do you have any health issues which may impact on your course attendance or completion?

Please help us to tailor the course to meet your needs by answering the following questions. Do you suffer from any of the following?

Physical disability

Arthritis or other joint problems

Eye-sight problems

Hearing difficulties

High/low blood pressure

Epilepsy

Asthma

Heart condition

Fatigue

Diabetes

Injury

Emotional problems

Any other—please use this space to describe:

Are you currently taking medication? If YES, what are you taking and what is it for?

Have you seen a counsellor, psychiatrist or other mental health worker in the last 5 years? If YES, please give details.

Do you have any specific needs or require any adjustments whilst training? E.g. Dyslexia, if so please give details.

Your details will be kept in accordance with the Data Protection act 2018

I understand that my details will be kept on file for the duration of my training and for 8 years thereafter

I would like to be sent information and newsletters from Real Yoga and Yoga Root. YES / NO

Signed

Date

Please send the completed form to Patricia Cronin at patricia@theyogaroot.com, or by post to 24 Middle Hill, Englefield Green, Egham, Surrey, TW20 0JQ

Once your application has been accepted, we will contact you to arrange a phone/zoom interview