



**ZUDA**  
LIVE A POWERFUL  
HAPPY LIFE

# TEACHER TRAINING PROGRAM

## 200 Hour Program Application

Registered Yoga Alliance Certified Program

Program Dates: February 18 - May 16, 2010

### Personal Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Sex: M F

Street Address: \_\_\_\_\_ Apt # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email (print clearly): \_\_\_\_\_

Current Occupation: \_\_\_\_\_ How Long? \_\_\_\_\_

### Teaching & Education

Are you currently teaching Yoga? YES NO

If yes, how long? 1yr or less 1-5yr 5yr+

If yes, what style (s)? \_\_\_\_\_

How did you hear about Zuda's Teacher Training? \_\_\_\_\_

List all previous yoga education, trainings or workshops, including any previous trainings or intensives with Zuda:

### Required Essay Questions (Attach on a separate sheet)

- Why do you practice yoga?
- What do you hope to achieve from Zuda Teacher Training?
- What makes a good yoga teacher?
- What do you find the most challenging part of yoga?
- What is the easiest part of yoga for you?
- How do you describe an empowered person?

**I hereby declare the information in this application is true and complete. I understand that providing false information is grounds for rejection of this application.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**I understand that the \$25 application fee is non-refundable and/or transferable, whether I am accepted or declined into the Zuda Teacher Training Program.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**Thank You!**

**Upon review of your application, if accepted into the program , you will be notified via email about the next steps to take. If you have any questions or for more information, please do not hesitate to email me at amanda@zudayoga.com. Please allow 1 week for processing time.**

**Please Include:**

- **\$25 non-refudable and/or transferable application fee (checks made to: Zuda Yoga)**
- **Completed Application**
- **Essay Questions**
- **A photo of yourself (clear head shot)**

**Mailing Address:**

**Zuda Yoga  
c/o Teacher Training 2010  
1515 19th Street Suite 104  
Sacramento, CA 95811**

**Email Address:**

**amanda@zudayoga.com  
subject line: ZTT 2010 Application**