

YOGA ASSOCIATION OF ALBERTA
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**APPLICATION FOR
600-HOUR CERTIFICATION
INTERMEDIATE TEACHER STATUS**

- * Applicants must maintain YAA membership and be a member in good standing. *
- * Applications must be received by the applicable deadline (March 1st for May certification, July 1st for September certification, and November 1st for January certification.) *
- * Please be advised that any applicant may be subject to an audit of submitted documentation at anytime. *

Name: _____	E-mail Address: _____
Address: _____	
City/Province: _____	Postal Code: _____
Phone Number: (Home) _____	(Alternate) _____

The YAA’s definition of an **Intermediate Teacher** is a person who teaches weekly hatha yoga classes that YAA TTP students are able to attend in order to meet the 100 hour weekly hatha yoga classes requirement; who works in collaboration with the TTP student’s chosen Senior Teacher in supervising students; and who has long-standing experience as teacher and practitioner with:

- 10 or more years of on-going learning and practice of hatha yoga, including
- 6 years or more of on-going teaching experience as a YAA Certified Hatha Yoga Teacher (or equivalent), which would include a minimum of 600 hours of hatha yoga teacher training/upgrading.

To apply, please submit this form to the above with the following:

1. A **reference letter** from a YAA Certified Senior Teacher (or equivalent) with whom the applicant has mentored that attests to the applicants’ maturity of practice and teaching skills, and
2. A **character reference** from another YAA Certified Senior Teacher that verifies that their professional conduct reflects the YAA Code of Ethics.

Please provide the following information for review by the YAA Certification Committee:

1. In what year did you first start taking hatha yoga classes in a formal setting? _____
2. Give a synopsis of the history of your early yoga practice and teacher training. Give specific details such as workshop titles and instructors and names of weekly class teachers.

3. Describe the nature of your present yoga practice. (e.g. Tradition, style, types of practices, areas of interest, expertise).

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4. Briefly describe the weekly hatha yoga classes that you teach.

5. Are you willing to work in collaboration with the TTP students' chosen YAA Certified Senior Teachers in supervising students? _____

_____ **Please initial that you are familiar with the most up-to-date YAA Hatha Yoga Teacher Training Syllabus and Certification Guidelines, including Section I.6: Senior Teacher / Intermediate Teacher Guidelines**, which can be downloaded and printed from the YAA website: www.yoga.ca

The information on this form is used to determine eligibility in YAA programs. By signing below, I affirm that all the documents attached to this certification application are correct, complete and fully disclose my yoga activities. I agree to have my name, phone number, teaching location and training, e-mail and/or website added to the YAA Directory in the *Yoga Bridge* and on the YAA Website. I also agree to receive commercial electronic emails from the YAA. All other information is kept confidential. The YAA does not sell databases to third parties.

Applicant's Signature: _____ Date: _____