



INTEGRAL YOGA®
INTERMEDIATE HATHA YOGA TEACHER TRAINING
APPLICATION LETTER
June 26 – July 15, 2011

Greetings of Peace from Yogaville!

Thank you for your interest in our Intermediate Hatha Yoga Teacher Training Program. For more than 30 years, students from all over the world have come to participate in our residential Teacher Training programs. This letter contains the program information: curriculum, daily schedule, accommodations and an application form. After reading this material, if you have any questions or require additional information, please feel free to contact us.

The Intermediate Teacher Training course provides you with the opportunity to upgrade your teaching skills, deepen your practice, and expand your services by learning how to teach a Hatha Level II class. Intermediate asanas and variations are presented as well as intermediate pranayama practices. Scriptural study of the teachings of the Bhagavad Gita also is included—expanding your grounding in the universal teachings of Yoga for personal development and deepening your understanding for teaching.

WHAT MAKES INTEGRAL YOGA® UNIQUE?

Integral Yoga is a complete science that cultivates and maintains the physical, mental, emotional and spiritual health of the individual. The non-competitive approach and meditative exploration of the Integral Yoga practices create an indrawn awareness that allows each student to reconnect with deeper and more subtle aspects of being. Our comprehensive certification programs provide a strong foundation for personal and spiritual development, an appreciation for nurturing a personal practice and the skills to become a knowledgeable and professional Yoga teacher. The Integral Yoga training process fosters the teacher's sensitivities to help create a safe environment for their students that allow them to realize their potential, gain self respect and learn to be of greater service to others.

The Integral Yoga system of Hatha Yoga is utilized by the Commonwealth Cancer Help program and Dr. Dean Ornish in his book, *Dr. Dean Ornish's Program for Reversing Heart Disease*.

WHY A RESIDENTIAL PROGRAM?

The most effective teaching comes from direct experience. Our residential programs are designed to offer you the experience of living the teachings of Yoga and to present the necessary tools that will enable you to pass these great teachings on to others. During your stay, you will immerse yourself in the yogic lifestyle and transform your body, mind and spirit. Our residential programs offer a supportive and nurturing environment for practice and study away from the distractions of everyday life.

PROGRAM DATES

The program begins on Sunday, June 26, starting with registration at 4pm and ends after lunch on Friday, July 15th.

Satchidananda Ashram-Yogaville

108 Yogaville Way, Buckingham, Virginia 23921 Tel: 434.969.3121 ext. 153 iytt@iyiva.org www.integralyogaprograms.org

DAILY SCHEDULE

The daily schedule is very full; it is designed to help you fully realize the benefits of the Yoga practices and to offer you the optimum environment in which to study and learn. Each day begins with meditation at 6:00am, followed by a Hatha Yoga class. During the day, you will have training courses, workshops, practice sessions, a noon meditation at the beautiful LOTUS Temple and some free time. This schedule covers six days and five nights a week. You are expected to stay at the Ashram for the entire time to successfully complete the program.

CURRICULUM

The curriculum includes the following:

- Guidance in your personal Yoga practices
- Monitored teaching practice
- Details and guidance for teaching Hatha II
- Optional poses for this level
- Course in the Bhagavad Gita
- Further study of pranayama and meditation practice and theory
- Anatomy and physiology
- Workshops on your own personal practice of asana, pranayama and meditation

FACULTY

Swami Asokananda is one of Integral Yoga's foremost teachers, known for his warmth, intelligence and good humor.

Asokanandaji is one of our primary instructors for Intermediate and Advanced Hatha Yoga Teacher Training. Before his current position, he served as President of Satchidananda Ashram-Yogaville and the New York Integral Yoga Institute.

PREREQUISITES

Completions of the Basic Hatha Yoga and six months of teaching experience. We recommend that all students not trained through Integral Yoga familiarize themselves with the Integral Yoga method of teaching Hatha Yoga by taking classes at an Integral Yoga Institute or from an IY teacher. Information on Integral Yoga teachers in your area can be obtained from the online Teachers Directory at www.iyta.org or by contacting the Integral Yoga Teachers Association at 434-969-3121, ext. 177. If this is not possible, you may purchase the DVDs *Yoga with a Master* or *Intermediate Yoga Class with Swami Asokananda* from the Integral Yoga Multimedia Centre (Shakticom) at www.shakticom.org Tel: 434-969-1347.

Also recommended is the CD or audiotape Guided Relaxation by Sri Swami Satchidananda.

CERTIFICATION

Graduates earn Integral Yoga Certification to teach asanas and pranayama for Level II.

Integral Yoga may award approximately 170 hours towards Yoga Alliance registration with the completion of this course.

ATTENDANCE

Attendance is required for all sessions – from the program orientation on the first day through the coursework on the last day. This includes all morning and afternoon practices of Hatha Yoga and meditation.

DIET

You will enjoy three healthy vegetarian meals daily, served buffet style, with a salad bar. The diet includes simple, deliciously prepared fresh vegetables, whole grains, legumes, tofu and some dairy. No meat, fish or eggs are served.

ACCOMMODATIONS

Accommodation choices vary and include dorm, private room with shared bath and private room with private bath. You may also bring your own tent and camp at one of our tent sites. If you choose dorm accommodation, you will board in our modern dormitory, Vivekananda Vihar, conveniently located near classrooms and the meditation and dining halls. Men and women are housed separately. We have rooms that accommodate up to six people. Generally, we are able to arrange accommodations so that the smaller rooms house two or three people and the larger rooms house four or five people. Private rooms are available at an additional price. Please keep in mind that private rooms are limited. If a private room is your accommodation choice, we recommend securing your reservation by applying early, especially during the summer season.

COURSE COSTS

The tuition for this course is \$1480. The prices for our various accommodations are as follows:

Tent (own)	\$915	Dormitory	\$1345
Private Room/Shared Bath	\$1715	Private Room/Private Bath	\$2000

***See payment page for available discounts.**

Because of the rigorous daily schedule, we are unable to grant any work scholarships in lieu of payment for the course. Also, we are not able to accommodate children.

FINANCIAL AID

Limited partial scholarships are available for students who can demonstrate financial need. Those wanting aid must submit a scholarship application with the program application. Please contact the Teacher Training Administrator for further details and a scholarship application; Tel: 434-969-3121 ext 153 or email iytt@iyiva.org

TO APPLY

Please complete and mail or fax your application with health form and your preferred payment option by May 26, 2011 to:

Teacher Training Administrator
Satchidananda Ashram—Yogaville
108 Yogaville Way
Buckingham, VA 23921
Fax: 434-969-1303

When your application is received, you may be contacted for additional information. Upon approval, you will receive an acceptance letter, along with more detailed information on what to bring, travel directions, additional accommodation information, ashram lifestyle, etc.

LATE REGISTRATION

In order for your application to be considered please submit no later than June 10, with full payment enclosed. After this date please check with Teacher Training Administration for availability before applying.

CANCELLATIONS

If you cancel 45 days or more prior to the first day of the training, you will receive a refund less \$150. If you cancel between 30 and 45 days prior to the first day, you will receive a refund less \$300. If you cancel less than 30 days prior to the start date, you will receive a refund less \$500. *You may transfer the amount paid (less a \$25 transfer fee) to another program within a 12-month period.*

No refund will be given after the start of the program.

FURTHER INFORMATION

Please direct questions about the course to the Teacher Training Department at 434-969-3121, ext. 153 or iytt@iyiva.org. Please direct questions concerning accommodations, travel arrangements and payment to the Ashram Reservation Center (ARC) at 1-800-858-9642 or 434-969-2048 or by email at arc@iyiva.org.

Thank you for your interest in this Integral Yoga Teacher Training Program. We are enclosing an application form, and we look forward to hearing from you soon. Please feel free to contact us if you have any questions.

Ever Yours in Yoga,



Lilavati Eberle
Teacher Training Administration
Tel: 434-969-3121, ext.153
E-mail: iytt@iyiva.org



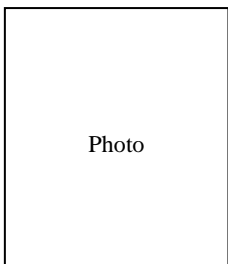
Supriya Ann Butz
Teacher Training Administration
Tel: 434-969-3121, ext.139
E-mail: supriya@iyiva.org



"The goal of Yoga is an easeful body,
peaceful mind and useful life."
— His Holiness Sri Swami Sachidananda, Founder

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PLEASE NOTE: The application form consists of four pages. Your application will be processed upon receipt of all four completed pages. Please use additional sheets of paper, if necessary.



NAME _____ (Name you prefer to be called, if different) _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____ COUNTRY _____
 BUSINESS ADDRESS (if applicable) _____

PHONE# home: _____ cell: _____ work: _____

E-MAIL ADDRESS _____

AGE _____ MONTH/DAY/YEAR OF BIRTH _____ Gender M _____ F _____

MARITAL STATUS _____ OCCUPATION _____

Is this your first program at Satchidananda Ashram Yogaville? Yes No

Level of your personal Hatha Yoga practice: Hatha I Hatha II Hatha III

Level of your personal meditation practice: Beginner Experienced

Please tell us where you heard about us: (Friend, Internet, Yoga Journal, Yoga+ Joyful Living, Advance magazine, Yoga Teacher)

Acceptance letters can be sent by: E-mail attachment OR regular mail (Please choose)

		<i>Office use only</i>	
	<i>Date</i>	<i>Initials</i>	
Received:	____	____	ARC:
Approved:	____	____	Email:
Sent to ARC:	____	____	Reg. Mail:

(Please continue with application)

**PAYMENT DETAILS FOR
INTERMEDIATE HATHA YOGA TEACHER TRAINING
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Note: You have the option of returning your payment by mail and including the following information on this page, or you can call in your credit card payment to the Ashram Reservation Center at 1-800-858-9642 (outside US, call 434-969-2048).

Discounts (PLEASE CHECK DISCOUNTS THAT MAY APPLY. DISCOUNTS WILL BE CONFIRMED UPON APPLICATION APPROVAL.)

- International 10% Senior Citizen 10% Military 10% IYTA member 5%
- Student Discount 10%. ID#: _____ Name of Institution _____
- Early Bird \$100.00 (offered for **full payment 90 days or more** before course start date.)
- IYI employee (If you are employed by an Integral Yoga Institute please check with your IYI manager for details regarding a discount for this program.) **Please note:** There is a 20% discount limit per application.

Tuition

Tuition for the Intermediate Teacher Training Course is: \$1,480

PLEASE CHOOSE YOUR ACCOMMODATION

<input type="checkbox"/> Tent: (\$915)	<input type="checkbox"/> Dorm (\$1,345)
<input type="checkbox"/> Private room/shared bath (\$1,715)	<input type="checkbox"/> Private room/private bath (\$2,000)
Total Costs: Tuition (\$1,480) Plus Accommodations: \$ _____	
Less Discount Requested (Discount given off total cost for tuition & accommodations) \$ _____	
TOTAL PAYMENT DUE: \$ _____	

PLEASE CHOOSE ONE OF THE FOLLOWING PAYMENT OPTIONS

<p>OPTION 1: <input type="checkbox"/> I am enclosing payment in full for tuition and accommodation \$ _____</p> <p>OPTION 2: <input type="checkbox"/> I am enclosing \$500 initial payment, and I agree to pay in full by May 26, 2011.</p> <p>OPTION 3: <input type="checkbox"/> I am enclosing a \$500 initial payment, and I authorize the balance of payment to be automatically processed to the credit card listed below two weeks prior to the start date of the program.</p> <p style="text-align: right;">Signature _____</p>
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- Check enclosed payable to SAYVA. Please charge full payment/initial payment to my credit card below.
- Visa MasterCard Discover

Acct. No. _____ Exp. Date _____

Name on Credit Card _____ Signature _____

(Please continue with application)

Please answer the following questions; use additional sheet(s) of paper if necessary:

- 1) When and where did you begin your practice of Yoga?
- 2) When and where did you complete your Basic Integral Yoga Teacher Training?
- 3) Who was/were your teacher trainer(s)?
- 4) What other Integral Yoga Teacher Training programs have you completed?
- 5) If you did not complete the Integral Yoga Teacher training program, what Yoga Teacher Training have you completed and when?
Please describe the program fully i.e.: length, content, etc.
- 6) What is your experience in teaching Yoga? Please describe fully where you teach Yoga, how often and the population(s) you serve.
- 7) What is your experience with Sri Swami Satchidananda and the teachings of Integral Yoga?
- 8) Please list and describe any Integral Yoga programs or retreats in which you have participated.
- 9) Please list other types of Yoga classes, training programs and practices in which you have participated.
- 10) Do you have a regular meditation practice? If so, please describe when you began the practice and what it consists of.
- 11) What is your current daily Yoga practice?
- 12) Is English your primary language? If not, what is?

On a separate sheet of paper, please tell why you want to take this Intermediate Teacher Training program. What do you hope to do with this training in your own life and in your service to others?

(Please continue with application)

HEALTH RECORD

The following information is requested in order to better serve you and the Yogaville staff.

If you answer yes to any of the following questions, please use a separate page for complete explanation.

- Are you under medical treatment for any physical or psychological condition? Yes ___ No ___
- Are you currently pregnant or trying to become pregnant? Yes ___ No ___
- Have you ever been treated or hospitalized for a psychiatric condition? Yes ___ No ___
- Do you have any long-term medical conditions? Yes ___ No ___
- Do you have any chronic physical limitations or disabilities? Yes ___ No ___
- Have you had a serious illness or major surgery within the last 5 years? Yes ___ No ___
- Do you have any dietary or health restrictions? Yes ___ No ___
- Do you have a communicable disease? Yes ___ No ___
- Do you snore? Yes ___ No ___
- Are you in recovery from a drug/alcohol addiction or eating disorder? Yes ___ No ___
- Do you have any hearing difficulties or vision impairment? Yes ___ No ___
- Describe your weekly alcohol consumption & or non-prescription drug use:

On a separate page, please list any prescription medication you are taking (indicate dosage and frequency of intake; we do not need to know about birth control or cosmetic prescriptions). Also please describe in detail any "yes" answers you provided above.

Emergency Contacts

In case of emergency, please contact:

Name _____ phone # _____

My relationship to the person above: _____

Physician _____ phone # _____

Therapist _____ phone # _____

AGREEMENT

I wish to learn the teachings of Sri Swami Satchidananda and experience the yogic way of life as taught at Satchidananda Ashram – Yogaville. Therefore, I agree to abide by the Ashram guidelines, which include following a vegetarian diet (**no meat, fish or eggs**) and refraining from the use of alcoholic beverages, cigarettes or recreational drugs *both on and off Ashram grounds for the duration of the program*. I realize that if I do not comply, I may be asked to leave. I certify that I am in good health and have no physical or mental ailments, except as may be indicated on this application. I further agree to assume full responsibility for any injuries or damages that might occur to myself or my property during my stay.

Signature _____ Date _____