



Yoga Teacher Application

Thank you for your interest in Prasada and being part of our team. Please complete the following application and return to Stacy Hines at stacy@prasadawholebeing.com or mail to 129 Barley Court, Langhorne, PA 19047. All yoga teachers are required to have liability insurance. Please provide verification of your insurance policy, YTT certificate and résumé with this application. Visit us at www.prasadawholebeing.com for more information.

Name: _____ Date: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____ E-Mail: _____

Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____ Date of Birth: _____

Emergency Contact: _____ Phone: (____) _____ Relationship: _____

How did you hear about us? _____

Do have a car? _____ If not, what forms of transportation do you use? _____

Outline your training and list the certifications you hold. _____

What interests you about teaching/working in the corporate environment? _____

What do your students typically say about your teaching? _____

What do you see as your role for students/clients in the corporate environment? _____

List your onsite yoga experience _____

List the classes, times and locations where you are currently teaching. _____

Indicate the Prasada programs you are interested in applying for:

- Corporate Yoga: 45-60 minutes vinyasa yoga on a mat
- Yoga at Work/Yoga Break: 15-45 minutes chair yoga with seated and standing positions
- Live Great Workshop Presentations: 45-60 minute wellness presentations (numerous topics)
- Health Fairs: mini presentations/ yoga break and talking with people about Prasada programs

Please indicate your available times and circle the slot that you would most love to have a Prasada class/client.

- | | | | | |
|--|---|--|--|--|
| <input type="checkbox"/> Mon am | <input type="checkbox"/> Tues am | <input type="checkbox"/> Wed am | <input type="checkbox"/> Thurs am | <input type="checkbox"/> Fri am |
| <input type="checkbox"/> Mon lunch | <input type="checkbox"/> Tues lunch | <input type="checkbox"/> Wed lunch | <input type="checkbox"/> Thurs lunch | <input type="checkbox"/> Fri lunch |
| <input type="checkbox"/> Mon afternoon | <input type="checkbox"/> Tues afternoon | <input type="checkbox"/> Wed afternoon | <input type="checkbox"/> Thurs afternoon | <input type="checkbox"/> Fri afternoon |
| <input type="checkbox"/> Mon early evening | <input type="checkbox"/> Tues early evening | <input type="checkbox"/> Wed early evening | <input type="checkbox"/> Thurs early evening | <input type="checkbox"/> Fri early evening |