



YOGA ACADEMY OF NORTH AMERICA

Application for Recognition of Prior Learning (RPL)

All trainees who intend to study in any of the Yogic Studies and/or Teacher Training modules may apply for RPL.

- Please print clearly in black ink. Add additional pages where necessary.
- Complete this form and send it to YANA with a **\$50 non-refundable** processing fee plus *all* the relevant documentation. **Documentation should include copies of course outlines or course descriptions as well as proof of passing the relevant course or subject** (e.g. academic record or transcript, certificates or diplomas). Additional supporting evidence may be requested. Do not send original documents; you will be contacted if these need to be seen.
- Refer to the Procedure Guide for Recognition of Prior Learning for further information about the RPL process and evaluation criteria.
- Exemption from compulsory parts of courses may be granted in cases where a student has reached a level of competence that is equal to or exceeds the knowledge and skills the area(s) for which recognition/credit is sought.
- **Note that an application for RPL does not guarantee that RPL will be granted.**
- Applicants will be notified in writing of the outcome of the application. Students are advised to submit their application at least **four weeks prior to the enrolment deadline of the course.**
- Please do not consider this as application for a position in a course. A separate course application form needs to be completed and sent with this application or after this application has been processed.
- YANA does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.

Section 1: Pathway for RPL

Mark with an "x" for which RPL Pathway you are applying

	Module Name	Course(s) or Activity to be Considered for Equivalency	Course or Modules(s) for which Credit is Sought
<input type="checkbox"/>	Articulation		
<input type="checkbox"/>	Recognition of Formal Coursework		
<input type="checkbox"/>	Recognition of Current Competency		
<input type="checkbox"/>	Demonstration of Current Competency		
<input type="checkbox"/>	Distant learning for 1st 4 days of YS1		
<input type="checkbox"/>	Distant learning for 1st week of YS1		
<input type="checkbox"/>	Other		

Section 2: Personal Information

Last name _____ First name _____
 Initiation name (if applicable) _____ Initiation type (if applicable) _____
 Street address _____ City _____
 State or province _____ Postcode _____ Country _____
 Mailing address (if different from above) _____
 Female Male Are you at least 18 years of age? Yes No Date of birth _____
 Country of birth _____ Nationality _____
 Home Phone _____ Work _____ Mobile _____
 Email Address (please print clearly) _____ @ _____

EMERGENCY CONTACT

Name of person to be contacted in an emergency _____
 Phone no _____ Relationship _____

Section 3: Yoga Information

Please indicate any previous **SATYANANDA YOGA**® Training

Module Name	Location	Year Module Completed -or- Date of Assessment, if still pending	Certificate Date

Please attach copies of completion certificates for each module

Other previous major yoga course _____
 Location _____ Dates of course and hours per day _____
 Certification/Qualification Received _____
 Organization/ yoga style/ tradition _____
 Are you able to provide a certificate and a copy of the syllabus for this course? Yes No

Other previous major yoga course _____
 Location _____ Dates of course and hours per day _____
 Certification/Qualification Received _____
 Organization/ yoga style/ tradition _____
 Are you able to provide a certificate and a copy of the syllabus for this course? Yes No

Please provide the name of Yoga teachers who can confirm your qualifications for courses without certificates.

Name _____ Telephone _____
 Name _____ Telephone _____

Yoga Practice

How long have you been practicing yoga? Number of years _____ Regularity _____

Have you attended a regular yoga class? Yes No For how long? _____

What style(s) of yoga do you practice? _____

Do you practice shatkarmas? Yes No Which practice(s)? _____ Regularity _____

Do you have a home practice Yes No No. of Years _____ Regularity _____ Provide details on separate sheet

Long term residence in a yoga center or ashram (if any)

Where _____ from / to _____

Where _____ from / to _____

Yoga Teaching Experience (if any)

How long have you been teaching? Years _____ from / to _____

Average number of classes per week _____ Type of classes _____

Organization/ yoga style/ tradition _____

Courses/seminars/workshops you have conducted _____

Hours as lecturer/presenter _____ Topics _____

Other relevant skills or training _____

Please list any postsecondary education & degrees received _____

List personal benefits to be gained by recognition of current competency for the requested course:

Other supporting comments:

Current Occupation: _____

Employer: _____

How long have you had this position? _____

Section 4: Declaration

Please read carefully before signing below:

I attest that the information provided in this application is complete and accurate. If any information is found to be deliberately misrepresented I acknowledge that such inaccuracies may jeopardize the consideration of my RPL application.

I have read, understand and agree to abide by the conditions set out in this application and the Procedure Guide for Recognition of Prior Learning (RPL) and any modifications made to them.

Name (please print) _____

Signature _____ Date _____

Section 5: Payment

Make check and money orders payable to: Yoga Academy of North America (YANA) in US Dollars only.

Check one: Check/Money Order Ch/MO #. _____ Credit Card Type: M/C Visa Discover

Payment now being made US\$ _____.

Card # _____ | _____ | _____ | _____ Expiration Date: ____ | ____ V-Code _____

Name as it appears on card: _____

Billing address if different from above: _____

Signed _____ Date _____

Please note that early enrollment and foreign country discounts do not apply to RPL.

Send completed form to:

Attn: Enrollment
Yoga Academy of North America
2319 Lee Road
Cleveland Heights, OH 44118
USA

You may also send the application by:

Fax: 1-216-371-9780
Email: info@yogaacademyna.org

Call or email with questions:
Phone: 1-216-371-9760