IAYT Certification—Graduates of IAYT Accredited Programs

Section 1: Member Information

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<td>Date of Birth (format mm/dd/yyyy)*</td>
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Accredited program from which you graduated*

- Ajna Yoga Therapy (6/2014), Ajna Yoga Centre (CAN)
- Ananda Yoga™ Therapy Program (6/2014), Ananda School of Yoga and Meditation (USA)
- Certified Yoga Therapist 1000 Hour Diploma Program (6/2014), Yoga Therapy International (CAN)
- Clinical Yoga Therapy (9/2014), AUM hOMe Shala (USA)
- Comprehensive Yoga Therapy at YogaLife Institute (7/2014), YogaLife Institute (USA)
- Diploma of Yoga Therapy (6/2014), Wellpark College of Natural Therapies (NZL)
- Essential Yoga Therapy's Therapist Training Program (7/2014), Essential Yoga Therapy (USA)
- Functional Synergy Yoga Therapy (3/2015), Functional Synergy Yoga Therapy (CAN)
- Inner Peace Yoga Therapy Certification Program (6/2014), Inner Peace Yoga Therapy (USA)
- Integrative Yoga Therapy (11/2014), Integrative Yoga Therapy (BRA and USA)
- International Kundalini Yoga Therapeutic Practitioner Training (7/2015), Guru Ram Das Center for Med
- Kula Kamala Yoga Professional Yoga Therapist Certification Program (4/2015), Kula Kamala Yoga (USA)
- Master of Science in Yoga Therapy (11/2014), Maryland University of Integrative Health (USA)
- Niroga Institute Yoga Therapy Training Program (5/2015), Niroga Institute (USA)
- Phoenix Rising Yoga Therapy Training Program (10/2014), Phoenix Rising Yoga Therapy (USA)
- Sattva Therapy® Yoga Therapy Diploma Program (10/2015), PranaYoga School of Yoga and Holistic Health
- Soul of Yoga Institute Yoga Therapy Program (10/2014), Soul of Yoga Institute (USA)
- Spanda Yoga Movement Therapy Professional Yoga Therapist Training (6/2015), Spanda Yoga Movement
- Stress Management Center Yoga Therapy Program (4/2015), Stress Management Center Of Marin (USA)
- Viniyoga Therapist Training Program (6/2014), American Viniyoga Institute (USA)
- YATNA (Yoga as Therapy North America) (7/2014), YATNA (Yoga as Therapy North America) (USA)
- Yoga North Yoga Therapy Certification Program (6/2014), Yoga North International Soma Yoga Institute
Yoga Therapist Training Program (6/2014), Hot Yoga Wellness/Yoga Qigong Academy (CAN)

Yoga Therapy RX Levels I, II, III, IV, Intro to Ayurveda, Yoga, and Social Ecology (6/2014), Yoga Th

Yoga Vaidya Post Graduate Diploma in Yoga Therapy (1/2016), Yoga Vahini (IND)

Date of graduation (MM/YYYY)*

Please check yoga related organizations with which you are affiliated (if any)

- Ananda Yoga Teachers Association
- Australasian Association of Yoga Therapists
- British Council for Yoga Therapy
- Himalayan Institute Teachers Association
- Integral Yoga Teachers Association
- Iyengar Yoga National Association of the United States
- Kripalu Yoga Teachers Association
- Medical Yoga Society of Japan
- National Ayurvedic Medical Association
- Yoga Alliance
- Yoga Therapy Ireland
- Other

If other, please specify
Section 2: IAYT Policies

Carefully review the documents at the links provided below BEFORE answering.

IAYT Code Of Ethics and Professional Responsibilities

Have you read and agree to abide by the IAYT Code of Ethics?* ○ Yes

IAYT Grounds for Disciplinary Action

Have you read and agree to abide by the IAYT Grounds for Disciplinary Action?* ○ Yes

IAYT Certified Yoga Therapist Scope of Practice

Have you read and do you understand the IAYT Scope of Practice?* ○ Yes

Policy on the Use of C-IAYT Credential and Certification Service Mark

Have you read and agree to abide by the Use of C-IAYT Credential and Certification Service Mark ○ Yes
Section 3: Health Care Practitioner Information

Are you a licensed health care practitioner?*  
○ Yes  ○ No
If Yes, please select type of professional license
○ Acupuncturist
○ Chiropractor
○ Massage Therapist
○ Medical Doctor
○ Mental Health Counselor
○ Nurse
○ Nurse Practitioner
○ Occupational Therapist
○ Physical Therapist
○ Psychologist
○ Naturopathic Doctor
○ Osteopath
○ Doctor of Oriental Medicine
○ Other
If Other, please specify type of health care practitioner

Are you certified in other complementary modalities?  ○ Yes  ○ No
If Yes, please select type of training
○ Ayurvedic Health Counselor
○ Ayurvedic Practitioner
○ Ayurvedic Doctor
○ Physical Therapy Aide
○ Homeopathy
○ Herbology
○ Music Therapy
○ Art Therapy
○ Dance Therapy
○ Other
If Other, specify modality
Section 4: C-IAYT Listing, Comments, and Applicant Statement

I wish to be listed as a C-IAYT on the IAYT website*  ○ Yes  ○ No

Information for C-IAYT Certificate:
Enter your first and last names (and middle initial if desired) EXACTLY as you want them to appear on your C-IAYT certificate. Do NOT include any other credentials. (Other credentials will not be printed.) Provide the current address to which you want the certificate to be mailed.

First Name for certificate*

Middle Initial for certificate (if desired)

Last Name for certificate*

Mailing Address for certificate*

How has the application experience been for you so far?
○ Very Easy
○ Manageable
○ Very Hard

Your comments:

Applicant statement*

○ The information submitted is, to the best of my knowledge, true, accurate, and complete.
Section 5: File Submission

Congratulations! You have come to the end of the online portion of the application.

The next step is to submit your evidence of Accredited Program completion.

Click the following link to email your document:

[Email address will appear here in online application]

Please click on the link above and attach your evidence of Accredited Program completion to an email to send your file. PUT YOUR NAME AND MEMBER # IN THE SUBJECT LINE. This email address will place your file into IAYT’s secure dropbox account. The IAYT Certification team will be notified when it arrives. If an email is not automatically launched when you click on the link, simply copy and paste the address into an email.

Choose SUBMIT to complete your application.

Thank You!

The IAYT Certification Team