



## Yoga of the Heart application

July 18, 2019 - July 27, 2019

Greetings of Peace from Yogaville!

Thank you for your interest in Yoga of the Heart®. Yoga of the Heart® - Cardiac and Cancer Certification Training is a 10-day course which gives teachers the ability one to adapt the Yoga practices with those at risk for, or living with, heart disease, cancer and other life-altering illnesses. The training includes theory and practice of asana, pranayama, deep relaxation, imagery and meditation as applied to disease and general health. It focuses on the proven approach of allowing the heart to expand through compassion and love for self and others.

### **Program Dates**

The program begins on July 18, 2019, starting with registration at 1:30 pm, and ends at 12:30 pm on July 27, 2019. You are welcome to stay for lunch on July 27.

### **Daily Schedule**

The daily schedule is very full; it is designed to help you fully realize the benefits of the Yoga practices and provide the optimum environment for studying and learning. Each day begins with a Hatha Yoga class followed by an extended meditation. This schedule covers ten days and nine nights. You are expected to stay at the Ashram for the entire time to successfully complete the program.

### **Curriculum**

The curriculum includes classes in the following:

- Classes – adapted and applied for patients
- Physical Postures
- Imagery
- Relaxation
- Meditation
- Psycho-social connections
- Breathing practices
- Low-fat vegetarian diet
- Physiology of disease
- Research Findings
- Interfacing with the Medical Community
- Daily Hatha Yoga, group meditation & discussions

This course will be didactic as well as experiential. This will allow for a full and rich experience for us as

teachers and practitioners alike. Upon completion of the course you will have the skills to teach patients in a hospital or clinic setting, as well as on a private or individual basis.

### **Primary Teacher**

**Nischala Joy Devi** is a masterful teacher and healer, recognized for her innovative way of expressing Yoga and its subtle uses for spiritual growth and complete healing. Her dynamic delivery and deep inner conviction empower each individual, allowing the teachings to expand beyond boundaries and limitations of any one tradition enabling her to touch people's hearts.

Originally trained in Western medicine, she began to blend her practice with Yoga. She offered her expertise in developing the Yoga portion of The Dean Ornish Program for Reversing Heart Disease, and co-founded the award-winning Commonweal Cancer Help Program. Her book, *The Healing Path of Yoga*, and her Abundant WellBeing audio series expresses these teachings.

With her knowledge of Yoga and her experience in assisting those with life-threatening diseases (particularly people with heart disease and cancer), she created Yoga of the Heart®, a training and certification program for Yoga teachers and health professionals designed to adapt Yoga practices to the special needs of that population.

She was graced to spend over twenty-five years as a monastic disciple with the world-renowned Swami Satchidananda, receiving his direct guidance and teachings. She has been blessed with teachings from great Yoga masters in US, India, and worldwide.

She is now dedicated to bringing the feminine back into spirituality and the scriptures. Her latest book, *The Secret Power of Yoga*, is a woman's guide to the heart and spirit of the Yoga Sutras.

**Bhaskar Deva**, is a dedicated Yogi, since the age of 18. He lived 17 years as a monk at Satchidanada Ashram where he served as Development Coordinator, Board Member and pilot to Swami Satchidanandaji. He taught adaptive classes at the Dr. Dean Ornish Program for Reversing Heart Disease. From these years of experience he brings his expertise to *Yoga of the Heart® Cardiac and Cancer Certification Training*.

Bhaskar has been co-teaching Yoga of the Heart® internationally since its inception in 1998, leading adaptive asana classes that allow experienced Yogis to return to the beginner's mind as they delve deeply into a meditative physical and spiritual practice.

### **Prerequisites**

The course is available to all certified Yoga teachers with teaching experience and to medical professionals with some yoga experience.

### **Certification**

At the end of the course, graduates receive a diploma certifying them to teach Yoga of the Heart®.

Integral Yoga may award 100 hours towards Yoga Alliance® registration with the completion of this course.

Qualified professionals will also be awarded 50 hours of Continuing Nursing Education (CNE) credits.

### **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. Gluten free and vegan options are always available.

## **Accommodations**

Accommodation choices vary and include dorm, private room with shared bath, and private room with private bath. You can also bring a 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 \$1185. The prices for our various accommodations are as follows:

- Tent site: \$410
- Dormitory: \$615
- Private room/shared bath: \$930
- Private room/private bath: \$1100

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.

## **Discounts**

A 10% discount is available to members of the IYTA. No other discounts are apply.

## **Financial Aid**

Limited partial scholarships are available for students who can demonstrate financial need. Those wanting aid must submit a scholarship application with the training application. Please contact the Teacher Training Administrator for further details and a scholarship application.

## **To Apply**

To submit an electronic application, visit the Teacher Training section of [www.yogaville.org](http://www.yogaville.org). Alternatively, you can download, complete, and mail or fax a paper application. Please submit your application, health form, and a \$100 non-refundable application fee by June 18, 2019 to:

Teacher Training Administrator  
Satchidananda Ashram—Yogaville  
108 Yogaville Way  
Buckingham, VA 23921  
Fax: 434.969.1303

When your application is received, you will be contacted for additional information. Upon approval, you will receive an acceptance letter with detailed information on what to bring, travel directions, Ashram lifestyle, and accommodations. Upon acceptance, a \$400 deposit is required to secure your space, due within one week of acceptance.

### **Late Registration**

In order for your application to be considered, please submit no later than June 18, 2019, 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 [iyacademy@yogaville.org](mailto:iyacademy@yogaville.org). Please direct questions concerning accommodations, travel arrangements and payment to the Ashram Reservation Center (ARC) Tel: 1.800.858.9642 or 434.969.2048; email: [arc@yogaville.org](mailto:arc@yogaville.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,



Sita Rose  
IY Academy Manager  
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Shankar Parker  
IY Academy Admissions Administrator  
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# Application Form

## Yoga of the Heart

July 18, 2019 - July 27, 2019

**PLEASE NOTE:**

- This application form consists of **ten** pages. Use additional sheets of paper, if necessary.
- Please provide a recent photo of you (passport-sized, either digital (1MB max,) or print)
- **Fields in bold** are required.

Name	Address
<b>First</b>	<b>Street Address</b>
<b>Last</b>	Address Line 2
Preferred	<b>City</b>
<b>Birthdate</b> (MM/DD/YYYY)	<b>State / Province</b>
<b>Gender</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>ZIP / Postal Code</b>
Occupation	<b>Country</b>
Marital Status	

Contact Information
<b>Phone</b>
Alternate or Cell Phone
<b>Email</b>

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

How would you prefer to receive your acceptance letter?    ☐ Email Attachment    ☐ Regular USPS Delivery

How did you hear about us?

- ☐ Internet    ☐ Email Newsletter    ☐ Magazine (Name of magazine: \_\_\_\_\_)  
☐ Yoga Teacher    ☐ Program Guide    ☐ Other (Describe: \_\_\_\_\_)

Level of your Hatha Yoga practice:    ☐ Hatha I (Basic)    ☐ Hatha II (Intermediate)    ☐ Hatha III (advanced)

Level of your meditation practice:    ☐ Beginner    ☐ Experienced

<u>Office use only</u>			
<i>Initials</i>	<i>Date</i>	<i>Initials</i>	<i>Date</i>
<b>Received:</b> _____		<b>ARC:</b> _____	
<b>Approved:</b> _____		<b>Email:</b> _____	
<b>Sent to ARC:</b> _____		<b>Reg. Mail:</b> _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Office use only</p> <p><i>Date</i>   <i>Initials</i></p> <p>Received: _____</p> <p>Approved: _____</p> <p>Sent to ARC: _____</p> </div> <div style="width: 45%;"> <p><i>Date</i>   <i>Initials</i></p> <p>ARC: _____</p> <p>Email: _____</p> <p>Reg. Mail: _____</p> </div> </div>			

## Payment Details

Note: You have the option of returning your payment by mail and including the following information on this page, or you can provide credit card information over the telephone after acceptance into the program.

### Discounts

(Discount will be confirmed upon application approval. Discount given off total cost for tuition & accommodations.)

☐ IYTA member 10%

### Tuition

Tuition for this course is: \$1185

### Accommodations

Please choose your accommodation from among the following four options:

<input type="checkbox"/> Tent (Own): \$410	<input type="checkbox"/> Private Room/Shared Bath: \$930
<input type="checkbox"/> Dormitory: \$615	<input type="checkbox"/> Private Room/Private Bath: \$1100

Total Costs: Tuition \$1185 + Accommodations (includes \$100 Application Fee)	\$
Less Discount Requested	\$
Total payment due:	\$

### Payment Plan

Please choose one of the following two payment options.

- ☐ OPTION 1: I am enclosing the \$100 non-refundable application fee. I understand that upon acceptance, a \$400 deposit is required to secure my space, due within one week of acceptance. I agree to pay the remainder in full by one month prior to the program start date.
- ☐ OPTION 2: I am enclosing the \$100 non-refundable application fee. When my application is accepted, I will pay a deposit of \$400 to secure my space. 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.

### Payment Method

☐ Check enclosed payable to SAYVA.

Credit card: ☐ Visa ☐ MasterCard ☐ Discover

Card Number:

Expiration Date: (MM/YYYY)

Name on Card  Signature

## Essay Questions

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

1. What is your yoga background?
2. Where did you receive your yoga teacher certification?
3. How long have you been teaching yoga?
4. Are you currently teaching yoga?
5. What is your experience with people who are ill?

**6. Why do you want to work with cardiac and cancer patients? What will you do with this training?**

**7. Do you have a regular spiritual practice of your own? Please describe.**

**8. How did you hear about Yoga of the Heart®?**

**9. Please briefly describe your personal and occupational background, as well as the spiritual background that has influenced you to apply to this training.**

**10. Please describe any physical or emotional issues, both past and current.**

# 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.*

	Yes	No
Are you under medical treatment for any physical or psychological condition?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently pregnant or trying to become pregnant?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been treated or hospitalized for a psychiatric condition?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any long-term medical conditions?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any chronic physical limitations or disabilities?	<input type="checkbox"/>	<input type="checkbox"/>
Have you had a serious illness or major surgery within the last 5 years?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any dietary or health restrictions?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a communicable disease?	<input type="checkbox"/>	<input type="checkbox"/>
Do you snore?	<input type="checkbox"/>	<input type="checkbox"/>
Are you in recovery from a drug/alcohol addiction or eating disorder?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any hearing difficulties or vision impairment?	<input type="checkbox"/>	<input type="checkbox"/>

## Describe your weekly alcohol consumption and/or non-prescription drug use:

Please list any prescription medication you are taking, including dosage and frequency of intake. We do **not** need to know about birth control or cosmetic prescriptions.

Prescription name	Dosage	Frequency

## Please describe in detail any “yes” answers you provided above.

# Emergency Contacts

*In case of emergency, please contact:*

Name:					
My relationship to the person above:					
Home phone:		Cell phone:		Work phone (or email):	

Name:					
My relationship to the person above:					
Home phone:		Cell phone:		Work phone (or email):	

Physician name:		Phone:	
Therapist name:		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 me or my property during my stay.

Printed name:	
Signature:	
Date:	

Please submit your application, health form, and a \$100 non-refundable application fee by June 18, 2019 to:

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Satchidananda Ashram–Yogaville  
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Thank you for your interest in this Integral Yoga Teacher Training Program. Please feel free to contact us if you have any questions.

Ever Yours in Yoga,



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IY Academy Manager  
Tel: 434.969.3121, ext.139  
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Shankar Parker  
IY Academy Admissions Administrator  
Tel: 434.969.3121, ext. 153  
e-mail: [iyacademy@yogaville.org](mailto:iyacademy@yogaville.org)