



# Ananda Institute of Living Yoga

*"Where Yoga Comes to Life"*

## APPLICATION – THE ART & SCIENCE OF SPIRITUAL COUNSELING

Thank you for your interest in the Institute’s programs! Please complete this Application and send or deliver it to us with your \$50 Application fee.<sup>1</sup> All information is confidential.

**Meditation & Hatha Yoga (postures) practice:** You should have already established a personal practice of meditation for a period of at least six months. It would be helpful if you also have regular hatha yoga (postures) practice.

**Prerequisite course:** The raja segment of the Raja Yoga Intensive is a prerequisite to taking this course. It is shown in the Institute curriculum information or on the Ananda Washington website ([www.AnandaWashington.org](http://www.AnandaWashington.org)). Special fees apply to students taking the raja segment “for credit” as part of the Institute. (The Raja course can be taken before, during, or, with advance consent, after the Spiritual Counseling course.)

So, if you’re ready, let us begin! (PLEASE PRINT!)

Name & Address:

Name	
Friends call me	
Street address	
City, State	
Zip	

Phones

Home: ( ) \_\_\_\_ - \_\_\_\_ Best Times: \_\_\_\_\_

Work: ( ) \_\_\_\_ - \_\_\_\_ Best Times: \_\_\_\_\_

Cell: ( ) \_\_\_\_ - \_\_\_\_ Best Times: \_\_\_\_\_

Email:

Primary \_\_\_\_\_@\_\_\_\_\_

Other: \_\_\_\_\_@\_\_\_\_\_

**Raja Yoga Intensive:** Have you taken this prerequisite course? (It can be taken simultaneously but not generally AFTER): \_\_\_\_Yes \_\_\_\_No; if YES, did you take it for credit (by paying the requisite fees, and completing the homework and final exam?)

Dates and locations taken: \_\_\_\_\_

Have you paid the one-time, lifetime (nonrefundable) \$50 Institute Application fee?

If so: when? \_\_\_\_\_

Have you paid the \$45 raja documentation fee? If so, when: \_\_\_\_\_

<sup>1</sup> Application fee is nonrefundable. Most likely you have paid this already when (if) you’ve taken the raja segment previously or perhaps if you took Yoga Teacher Training or Meditation Teacher Training.

Your Interest in the Institute

Please describe your interests or goals in enrolling in the Art & Science of Spiritual Counseling:

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**Please tell us about your professional counseling background, if any:**

I have no professional counseling or therapy background. \_\_\_\_\_  
Do you have a degree or certificate in counseling, psychology or therapy? \_\_\_\_\_  
If so, what year \_\_\_\_\_?  
Do you practice professional counseling or therapy currently? \_\_\_\_\_  
If so, where? \_\_\_\_\_ when? \_\_\_\_\_ And what type specifically? \_\_\_\_\_  
Do you intend or hope to offer spiritual counsel formally to others?  
\_\_\_\_\_

If so, where do you expect to do this? \_\_\_\_Ananda? \_\_\_\_Yoga studio \_\_\_\_from home?  
\_\_\_\_Workplace? \_\_\_\_ Other? \_\_\_\_\_

Your Current Life Responsibilities

1) Which best describes your life at this time?

\_\_\_\_Student      \_\_\_\_Full time Career      \_\_\_\_at home parent  
\_\_\_\_Part time work      \_\_\_\_Transition      \_\_\_\_Retired

2) This course requires attendance at 9 Saturdays (9a - 2p or 9a - 5:30p); plus time for reading and homework. And, for some taking the Raja intensive course at the same time on a weeknight for 11-12 weeks. Do you feel that your current duties will allow you time for these commitment? If a parent of minor children, do you have child care coverage?  
\_\_\_\_\_

3) Describe any known travel commitments during the period of enrollment in the Spiritual Counseling program?  
\_\_\_\_\_  
\_\_\_\_\_

5) Do you have a car for attending classes at the Institute? \_\_\_\_\_  
If not, please explain how you might obtain transportation:  
\_\_\_\_\_

## Your Health

### MEDICAL INFORMATION

*All responses are confidential. We use this information only to better assist you during the program, not to screen participants. Attach additional sheets if necessary.* Date of Birth

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Briefly describe your current overall health

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Summarize any health or disability issues that might pose challenges for you during this course?

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Blood Pressure (circle one) **High** / **Low** / **Normal**. When was this last checked?

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Describe any history of cardiovascular problems. If you don't have any cardiovascular problems but are considered to be "at risk", then please indicate this as well.

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If you are pregnant, when is your baby due? \_\_\_\_\_

We share (vegetarian) lunch together, what dietary restrictions would you want to explain?

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During our up to 8.5 hour classes, there is a need to sit up, be alert, and take notes, write, or read. Floor sitting is fine but laying down is discouraged unless there is a medical necessity. Will you be ok with class-style sitting? (We have breaks, of course, and standing activities, as well.)

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Please indicate any other medications that you are taking that might interfere with your physical balance, wakefulness, ability to concentrate, or mental clarity.

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Please note:

Although the practice of yoga and meditation has been shown to have important physical and mental health benefits, such practices, as well as spiritual counseling are not to be viewed as a substitute for professional medical treatment, supervision, or professional medical counsel. We caution students not to discontinue prescribed medications, treatments, or medical supervision during enrollment in the Institute. It is specifically a condition of attendance at the Institute that students be physically and mentally able to participate, respectful of all, and actively calm.

**Please Tell us About Your Meditation Practice**

Do you practice meditation regularly? **Yes**\_\_ / **No** \_\_

How many days in the week do you generally meditate? \_\_\_\_\_

In most sittings, how long do you meditate? \_\_\_\_\_

When did this pattern of meditation begin (how long ago)? \_\_\_\_\_

What time of day is your best time for meditation? \_\_\_\_\_

Which tradition(s) or techniques(s)?

\_\_\_\_\_

Do you intend or hope to offer spiritual counsel to others?

\_\_\_\_\_

If so, where do you expect to do this? \_\_\_\_Ananda? \_\_\_\_Yoga studio \_\_\_\_from home?  
\_\_\_\_Workplace? \_\_\_\_ Other?\_\_\_\_\_

Is there anything about your spiritual journey and/or meditation practice or training that you would like to share? [religious upbringing, if any; other spiritual trainings or studies; etc.]

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

What other aspects of your life might you wish to share? [place of birth, education, hobbies, sports, talents, interests, languages, past jobs, extent of travels]

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Are you involved (member) with Ananda? \_\_\_\_\_<sup>2</sup>

Are you a “kriyaban” with Ananda? \_\_\_\_\_

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<sup>2</sup> Membership, affiliation or participation in Ananda is not required to take this course.

