## Application for SATYA Expanded Scholarship

We are happy to consider you for our Expanded Scholarship. This scholarship is the Ashram's support program for teachers who are dedicated to cultivating a large student body. It is our way of recognizing your achievements as well as your goals to expand  $Svaroopa^{\circ}$  yoga.

These scholarships are available for trainings you have not previously taken, including YTT, ATT and Deeper trainings as well EYTS programs offered at our training facility in Downingtown PA. Expanded Scholarships are awarded based on availability of scholarship funds and equitable distribution among those whose applications have been approved.

- The maximum award is 25% of your enrollment fees, including Tuition, DTS and Housing & Meals. They may not be combined with any other discounts.
- · Two awards are granted in every quarter.
- The maximum award per course is 25% to a single teacher.
- The maximum awards per year to a single teacher is 2. Per year = the year you receive the award.
- A second award must not diminish the max award for another teacher who has not received an award in the year.

The questions on this application focus on the number of students and yoga therapy clients you are serving in an average week. To qualify, you must have an average of 25 students per week (online or in-person).

There are no questions about financial need because this scholarship is not based on need. It is intended to support those who are teaching and spreading  $Svaroopa^{(0)}$  yoga most effectively.

Please let us know if you need any help with completing this form. When complete, please send it to: programs@svaroopayoga.org.

When we receive your application, we will confirm that we have received it within one week. Our reviewers consider it in the cycle of Application Dates (noted below). We treat all your information with utmost confidentiality and respect.

Application Due Dates	Date Scholarship Awarded	To use for trainings between
January 15	February 15	April 1 (current year) – March 31 (next year)
April 15	May 15	July 1 (current year) – June 30 (next year)
July 15	August 15	Oct 1 (current year) — Sept 30 (next year)
October 15	November 15	Jan 1 (current year) – Dec 31 (next year)

Thank you for your interest in our trainings. We hope to be able to support you with a scholarship!



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YOU MAY TYPE DIRECTLY INTO THIS APPLICATION FORM.

Applicant Information	
Date of Application	
Name of Applicant	
Applicant Address	
Phone (Day) (Evening)	(Cell)
Email Address	
Are you a SATYA Member?	○ Yes ○ No
Program You are Interested in Taking	
Program Name	
Program Dates	
Enrollment Fees  (including tuition, DTS, materials fee, housing & meals)	
Current Teaching	
Are you currently teaching Svaroopa® yoga?	○ Yes ○ No
If yes, please select how you are teaching:	○ Full-Time ○ Part-Time
How many classes do you teach in an average week?	·
What levels of classes are you teaching?	
How many individul (different) students attend your classes in an average week?	•
How many total students do you teach in an average week?	·
(Note: one person attending two classes counts as 2)	



## Application for SATYA Expanded Scholarship Continued

Please provide website links below or send us brochures or fliers listing these cla	asses.
Half-Day or Weekend Workshops	
If you are certified to teach Half–Day or Weekend Workshops, complete this sec	tion:
How many have you taught in the last 3 months?	
How many students attended these workshops?	
How many of the attendees are your regular students?	
How many are new students?	
Your Recent Continuing Ed	
Please list your most recent Continuing Ed course and the date you took it.	
Course Name	Date
Yoga Therapist	
Are you currently giving Embodyment® or Svaroopa® Yoga Therapy sessions?	○ Yes ○ No
What is the average number of clients do you see each week?	
How many of your students have taken Foundations in the last 12 months?	



Application for SATYA Expanded Scholarship Continued

## **Scholarship Questions** Why are you applying for an Expanded Scholarship? How do you envision the growth of your yoga business over the next 5 years? What plans do you have for achieving this growth? Please tell us anything else you wish us to consider.

Thank you for your teaching and your application.

Namaste

Please send your completed form to: programs@svaroopayoga.org