



HOT YOGA TEACHER TRAINING

RECOMMENDATION LETTER

Date:

I am recommending the following student _____ for the
B.Free Hot Yoga Teacher Training, Spring 2016.

My signature below certifies that the above applicant has a 6 month daily practice under my supervision. The student is mentally and physically strong and stable enough to ensure the long hours of training. **Yes/ No**

I understand that following the 6 weeks intensive training the student will return to my studio for a further two weeks of practical experience. During which time the student will be given the opportunity to teach class (regular or mock classes) and gain general experience in studio operations such as check-in/ reception duties/ monitoring the room temperature: **Yes/ No**

Comments:

Full Name (print): _____

Studio Name: _____

Director of Studio: (please print) _____

Address: _____

City: _____ Country: _____

State: _____ Zip Code: _____

Telephone _____ Email: _____

Signature: X _____ Date: _____