Teacher Training Application

Please complete all appropriate fields below. Shaded fields are required.

First name:	
Last name:	
Birth date:	
Street address:	
City, State/Province:	
ZIP/Postal code, Country:	
Home phone:	
Cell phone:	
Email:	

Program applying for:

Advanced 12 month ▼

NOTE: If you are applying for the Intermediate Program, you must also complete and submit the Intermediate Program Enrollment Requirements form.

Referred by:

Studio	
Teacher	

Describe your Pilates experience:

How did you hear about the Teacher Training Program?

Prior Pilates Experience:

Instructor's name:	

Studio name:	
Studio phone:	
Length of time at this studio:	

How many times in the past six months have you worked out?

What are the main concepts emphasized in your sessions?

Which apparatus do you have experience with?

- ☐ Reformer
- ☐ Mat
- ☐ Cadillac
- ☐ Pole
- ☐ Chair
- ☐ Barrels

Describe your movement/athletic history:

Describe your health history:

Why do you want to become a Pilates instructor?

COLORADO
Division of Private Occupational Schools
Department of Higher Education

The Pilates Center is required by the Colorado Division of Private Occupational Schools to ask the following.

Student demographics:

Race/Ethnicity
○American Indian or Alaska Native
○Black or African American
○White
○Native Hawaiian or Other Pacific Islander
○Asian
○Two or more races
○Hispanic or Latino
○Other/Unknown
Gender
○Female
○Male
○Other/Unknown

Questions? Call Kelli at 303-494-3400 or email her at Kelli@thepilatescenter.com. Submit your application with a $105 USD fee to The Pilates Center, attn: Kelli Burkhalter Hutchins, 3127 28th Street, Boulder, Colorado 80301.

X

Signature Certificate

Document name: Teacher Training Application

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