



## MAITRI TEACHER APPLICATION FOR CERTIFICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone Number H \_\_\_\_\_ W \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_

1. Please list the Maitri programs you have participated in. Give dates and names of the teachers and whether the rooms or glasses were used.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please list the Maitri (Five Wisdom Energies Practice) programs you have staffed. Give dates and names of teachers and whether rooms or glasses were used.

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Are you a meditation instructor? When did you become one?

\_\_\_\_\_

4. What Vajrayana and Shambhala practices are you currently doing?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



5. What is your teaching experience in the Vajradhatu, Shambhala Training or Nalanda Gates or at Naropa University?

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6. Write a one page narrative of your personal experience and understanding of Maitri: The Five Wisdom Energies. (Separate page)

7. Why do you want to teach? (Separate page)

8. At what level do you feel you could teach?

(Assistant teachers always co-lead and present some material, Teachers may teach on their own)

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9. Please send two letters of recommendation by already certified Maitri teachers.

Return this form to:

WESTERN NORTH AMERICA

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EASTERN NORTH AMERICA

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