



# TTM Trainer Application

Member ID: \_\_\_\_\_ TTM ID: \_\_\_\_\_ Language: \_\_\_\_\_

## 1. Contact Information

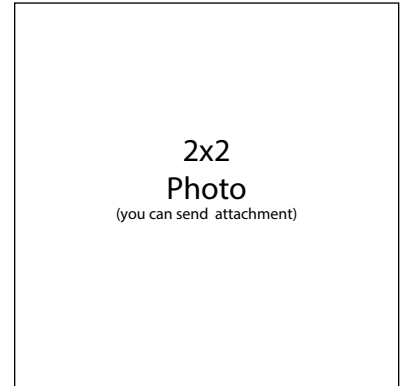
First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/ Province \_\_\_\_\_

Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_



Yang Family Tai Chi Teacher (if any) \_\_\_\_\_

Apply Date \_\_\_\_\_

## 2. Teacher Appraisal

Teacher Appraisal of Applicant's Character and Experience



To complete your application, a \$100.00 examination fee will be added to TTM camp tuition fees.

TTM Camp Sponsor

TTM ID: \_\_\_\_\_ Candidate Name: \_\_\_\_\_

### 3. Part II Examinations A, B and C

Part II A Interview:

\_\_\_\_\_ In person Skype Your Skype User I.D.

Part II B

Form Performance: \_\_\_\_\_ In person DVD YouTube YouTube Link

Part II C - Teaching Performance:

\_\_\_\_\_ DVD YouTube YouTube Link

### 4. Examination Score (Examiner use only)

#### PART II EXAM A

Examiner: \_\_\_\_\_ Score: \_\_\_\_\_ Pass No Pass

Date Of Submission: \_\_\_\_\_ Date of Evaluation: \_\_\_\_\_

#### PART II EXAM B

Examiner: \_\_\_\_\_ Score: \_\_\_\_\_ Pass No Pass

Date Of Submission: \_\_\_\_\_ Date of Evaluation: \_\_\_\_\_

#### PART II EXAM C

Examiner: \_\_\_\_\_ Score: \_\_\_\_\_ Pass No Pass

Date Of Submission: \_\_\_\_\_ Date of Evaluation: \_\_\_\_\_

Examination Committee Member Comments: \_\_\_\_\_ Pass No Pass Evaluation Date: \_\_\_\_\_

### 5. Examination Results (Association Officer Use Only)

Training Standards Department Signature: \_\_\_\_\_ Evaluation Date: \_\_\_\_\_

Email: [TTM@yangfamilytaichi.com](mailto:TTM@yangfamilytaichi.com)



INTERNATIONAL YANG FAMILY TAI CHI CHUAN ASSOCIATION