

Course Application Questions

What we would like is to better know who you are, what you are bringing to the program, how you can be a resource to others in the program and what you need from others in the way of support.

We hope this application will also help you become clearer about yourself, your goals and your expectations. If you need to speak with someone regarding your application or any of the questions, please feel free to contact us.

I am interested in pursuing the following studies

- Somatic Movement Education Program
- Infant Developmental Movement Education
- Body-Mind Centering® Practitioner Program
- Dance Movement Psychotherapy MA
- Individual courses or a study track

1. What is your educational background? Please list any post-secondary schools attended, dates, and any degrees or certificates received. You may enclose a resume instead of answering this question.

2. Please list work or other significant experience. You may enclose a resume instead of answering this question.



3. What experience have you had with Body-Mind Centering®? How did you first hear about it? Have you had individual sessions, classes or workshops with a Certified Practitioner? Who? Approximately how many hours?

4. Please list your experience with other body-mind disciplines (movement, dance, bodywork, other psychophysical approaches). Indicate whether your experience has been casual, serious amateur, semi-professional or professional.

5. What are your reasons for wanting to take this course or program? What are your expectations?

6. An important aspect of this program is its experiential nature. You will be working deeply with yourself and closely with other individuals and the group as a whole. You will be presented with a range of different teaching styles from our staff and different learning styles from other students. At times, you will be asked to step into learning styles that you may be unaccustomed to. In regard to these things, please tell us 1) your strengths and talents and 2) areas where you need support.



7. Do you have any physical or emotional conditions that could affect your participation in this program? If, yes, please describe.

8. Are you interested in the full Somatic Movement Education Program or in individual courses? Would you be interested in the 4-year Practitioner Program or the Infant Developmental Movement Education Program?

Please return to

Katy Dymoke
Embodiment-Move c/o Touchdown Dance
Waterside Arts Centre
Sale, M33 7ZF

embodimentmoveoffice@gmail.com

