EXAMINER'S RECORD

N a m e			Sex	Male Female		Date of Examination Year			Month	Day
			Age	Age			Date of Birth Year			Day
Karate Organization			Membership Number			- Height		cm	Weight	kg
Present Address						Nationality				
								Tel.		
Last Academic School Attended							Kata:			
Reference	Name					Relationship				
	Address							Tel.		

RANKING INFORMATION

SCORING

Rank Being Tested for Present				Basic	Kata	Kumite	Application of Techniques Research Others	Total Marks	Results	
Rank	Kyu	Dan							Chief Examiner Signature	
Date of Conferral	ear Month	Day	Α							
Registration No.	Dan	Kyu	В						PASS	
Number of Month Years in Karate T		Months		Remark					RE-EXAM	
Present Qualifications									PENDING	
Instructor	 	Class			camination Fee			Registration Fee		
Examiner	 	Class					rtegistrati			
Judge	 	Class								

Rank Being Tested for

Name

Name

AUTHORIZATION TO TAKE EXAMINATION

Karate Organization

No.

Examination Fee

Redistration Fee

Redistration Fee

Redistration Fee

Sign this slip and hand it in within THREE (3) months to receive "Dan" certificate or in case of failure, to receive refund of registration fee.