TaeKwonDo Training Center Application for Black Belt Rank Testing

Current Date		Name		
DOB	Age	Home Phone		
Address: Street	City	State	Zip	
	Email A	Address		
	_			
Current Rank	Last Tes	sting Date	Planned Test Date	
Applicant's Signa	ture	Instructo	or's Signature	

This form must be returned to your instructor no later than 1 week (7 days) prior to testing at a Black Belt Testing. The testing fee should be submitted with this form.

Fill out form in row with your current rank.

Current Rank	Promotion	Time in	Actual #	Min. Time	Min. # of	Min. Age
	Date	Rank(mon.)		in Rank	Classes	to Test
Advanced Red				2 Months	20	N/A
1st Degree				4 Months	32	N/A
Advanced 1st				6 Months	48	N/A
Senior 1st				6 Months	48	N/A
2nd Degree				4 Months	32	N/A
Advanced 2nd				10 Months	80	N/A
Senior 2nd				12 Months	96	13
Jr. 3rd Degree				N/A	N/A	16
3rd Dan				3 Years	N/A	18
4th Dan				4 Years	N/A	22

	Board Breaking Information		
Techniques and Sides			
-			

Any disabilities that may need to be taken into consideration for this testing?

Yes -- No

If Yes, please note on back in detail.