

RE-CERTIFICATION	PRE-TEST (	TEST
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## BLACK BELT PROMOTION APPLICATION

LAST NAME	FIRST NAME		SEX	DATE OF TEST	
TKD SCHOOL LOCATION					
DATE OF BIRTH AGE		HEIGHT		WEIGHT	
PHONE NUMBER		EMAIL ADDRESS			
CURRENT BELT LEVEL			DAN	BELT SIZE	
YES, I DESIRE TO BE EXAMI	NED FOR A HIGHER D	EGREE BLACK BELT II	N THE AR	T OF TAE-KWO	ON-DC
$\times$					
STUDENT SIGNATURE		PARENT SIGNATURE	IF UNDE	R 18	
DO N	NOT WRITE BELOW • OFFIC	CIAL SPACE FOR EXAMINE	₹		
6					
ITEM			1	PASS   FAI	ıL
PO•EUN					
GWANG•GAE					
GE•BAEK					
EUI•AM					
KO•DANG					
•••••					
CHOONG•JANG		2			
SAM·IL					
CHOI•YONG		7.0.3.			
Y00•SIN					
UL·JI					
MOON•MOO					
YON•GAE					
SE•JONG	VI S				
SO•SAN					
TONG·IL					
FREE SPARRING					
BREAKING					
BREAKING TERMINOLOGY					