WHITE TO YELLOW TIP Exam Form(H.K.D)

Student's Name:						DOB:					
Belt Size:											
I recognize that belts and certificates (if applicable) are awarded only when specific standards of performance are met. In the event that I may not perform to the satisfaction of the testing official(s), promotion may be delayed until further progress has been demonstrated. If I do not achieve that desired degree, I may retest for that degree on the next promotion test date. I recognize that promotion standards are uniform and that each belt degree reflects a specific level of competence.											
Date: Parent's Signature:											
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Form:						wea	apon:				
	1	2	,	3				1	2	3	
KI BON #1	'	_	`	3		Wea	apon #1				
						Wea	apon #2				
						Wea	apon #3				
1=Excellent	3=Needs Work				1:	=Excellent	2=Good	3=Needs	Work		
					 1 [
Techniques:						Bre	aking:				
		1	2	3				1	2	3	
Techniques 1 thru 5							p Rolling nd House K	iick			
Techniques 6 thru 10						Ax K	lick				
·							erse Side K Punch	ick			
1=Excellent	3=Needs Work				1:	=Excellent 2=Good 3=Needs Work			Work		
							_				
						-	Official's Signature				