ORANGE TO GREEN TIP Exam Form

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:						Kic	king Com	nbination	ı: 1	2	3	
	1	2	3	}		12: 1					_	
14 D	_				Kici	king Combi	ination #1					
Ko Ryo	Ц	Ш	Ц			Kicl	king Combi	ination #2				
						Kicking Combination #3 ☐ ☐ [
1=Excellent	xcellent 2=Good 3=Needs Work			rk		1=Excellent 2=Good 3=Needs Work					ork	
					- · - [
One Step Sp		_			Wea	apon:		1	2	3		
		1	2	3			apon #1 apon #2					
One Step Sparring #1						We	apon #3					
One Step Spa					Knife	aking: ^{Hand}		1	2	3		
One Step Spa					Skiping Round House Kick Skiping Side Kick Jump Reverse Side Kick							
1=Excellent	3=Needs Work				1	Excellent 2=Good 3=Needs Work			ork			
					-							
							Official's Signature					