

ORANGE TO GREEN BELT 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: _____

Falling Combination Techniques:

	1	2	3
Falling techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1=Excellent 2=Good 3=Needs Work

Kicking Combination:

	1	2	3
Kicking Combination #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kicking Combination #2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1=Excellent 2=Good 3=Needs Work

Grabbing Techniques:

	1	2	3
Techniques 1 thru 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Techniques 6 thru 10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1=Excellent 2=Good 3=Needs Work

Breaking:

	1	2	3
Rolling, Skipping Side Kick	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1=Excellent 2=Good 3=Needs Work

Official's Signature