J.W. Kim Taekwondo
APPLICATION FOR PROMOTION TEST

Name:__________________________________________

Age:_____________ Current Belt:_________________ 

Parent/Guardian’s Email:________________________________________

I hereby submit this application to the promotion board in accordance with the rules of World Taekwondo, Kukkiwon, and J.W. Kim Taekwondo.

Student Signature: Date: Parent or Guardian’s Signature:

Candidate’s Score

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<th>Curriculum</th>
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<td>Poomse</td>
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<td>Bar Chagie</td>
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<td>Kibon Donjak</td>
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<td>Kie Hap</td>
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<td>Bo Gyorugie</td>
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<td>Concentration</td>
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<td>Kyopa</td>
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<td>Terminology</td>
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<td>Fall/Roll</td>
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Average Grade: _____ Rank to be Awarded: _______Gup

Examiner’s Remarks:

Point System:
A: Excellent
B: Good
C: Satisfactory
D: Minimum Passing Grade
F: Failure

Examiner’s Signature: _______________________________
J.W. Kim Taekwondo

BELT PROMOTION – HOME AND SCHOOL EVALUATION

Dear Parents and Teachers:

Our main objective at J.W. Kim Taekwondo is the development of well rounded students. We teach the principles of Black Belt Excellence. Not only do students become Black Belts in Taekwondo, but they also strive to become academic Black Belts and eventually develop an attitude of constant achievement and positivity. We use Black Belt as a symbol of personal excellence.

In order to promote our students’ progress toward these goals, we respectfully request completion of the following information:

Parent’s Evaluation

My child’s behavior at home has been congruent with that of the principles of Black Belt Excellence: courtesy, respect, discipline, self-control, focus, etc.: Yes_____ No_____

My child practices his/her Taekwondo at home: Yes_____ No_____

I have questions/concerns. The most convenient time and number to reach me is: ____________________________ Phone: ____________________________

Please provide a brief “Letter of Recommendation” below, expanding on your child’s behavior both at home and at school:
____________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________

Parent’s Signature:_____________________ Date:____________________

Teacher’s Evaluation

Teacher’s name:_____________________ School name:_____________________ Grade:_____

has been doing satisfactory work in my class and is receiving satisfactory grades while being respectful to teachers and other students. Yes_____ No_____

I am interested in having a Taekwondo demonstration for my class: Yes_____ No_____ 

Phone:_________________________ Convenient time to call:_________________________

Emails:_________________________ Signature:_________________________

Student Referral

The following friend(s) is interested in martial arts lessons. Please contact them and invite them as my guest:

Name:_____________________ Name:_____________________

Phone Number:_____________________ Phone Number:_____________________

Email:_____________________ Email:_____________________

If our students do not meet any of the above qualifications, either at home, school, or J. W. Kim Taekwondo, we will hold the student’s promotion until there has been satisfactory improvement. If you have any direct feedback beyond the scope of this form, please feel free to write on a separate piece of paper or call us directly at 303-488-9730.

Grandmaster J. W. Kim