INTERNATIONAL BLACK BELT CENTER OF VIRGINIA

Testing Application Adult/Youth 7th Kup

Last Name: Please print your name care	fully, exactly as you wish it to a	ppear on your certificate passport.	
First Name:			
Number of Classes to date:			
Date of Birth:			
Date of your last rank promotion:			
PRE- TEST			
Testing Requirements	Date of PRE-Watch	Date of PRE-Watch	
Special Techniques:	To Improve:	To Improve:	
Teryon (non-contact), 8 self-created combinations ending with power test			
Forms & Philosophy: #4 Won-Hyo # 5 Yul-Kok, meaning of form	To Improve:	To Improve:	
Power Test:	To Improve:	To Improve:	
Pande-Chagi, Tolra Pande-Chagi			
Testing Fee: \$50 Test Dat	te: Paid:		

Signature of Head Instructor for Test Application