

## IKD DAN REGISTRATION AND EXAMINATION RECORD

For purposes of clarity all information must be typewritten. Handwritten forms will be returned.

Name				PHOTO
Address				
		ZIP/PC		
Telephone		Email		
Registering for		Date of Exam (dd/mm/yy)		
Examiner		Instructor		
Instructor's Signature				
Dojo Name				
Region/Country				
Date of Birth (dd/mm/yy)		Sex (M/F)		Occupation
Last School or College			Degree	

	Date of Exam	Registration No.		Date of Exam	Registration No.
1 <sup>st</sup> Dan			5 <sup>th</sup> Dan		
2 <sup>nd</sup> Dan			6 <sup>th</sup> Dan		
3 <sup>rd</sup> Dan			7 <sup>th</sup> Dan		
4 <sup>th</sup> Dan			8 <sup>th</sup> Dan		

Please list my rank in the register of the IKD. I promise to uphold the honour and standards of IKD

Student's Signature

Present Age: \_\_\_\_\_

FOR EXAMINER'S USE ONLY

Part	Kihon – Arm	Major Kata Name	Major Kata Mark	Major Kata Bunkai or Enbu	Kumite – Attack
A					
Part	Kihon – Leg	Minor Kata Name	Minor Kata Mark	Minor Kata Bunkai	Kumite – Defence or Self Defense
B					
C	Written Research	A: 90% B: 80% C: 70% D: 60%	Research Presentation	○    △    ☒	Other Kata/bunkai:
Attendance: A B C	Pass:  _____ Dan	Re-exam:  _____ Mo./_____ Yr.	No Pass:	Regular Rank Recommended Honourary	

Authorized Examiner: \_\_\_\_\_ Exam Date: \_\_\_\_\_ Place: \_\_\_\_\_