

REQUEST FOR IOGKF DAN REGISTRATION

I hereby respectfully request that, upon successful completion of my grading, my rank be registered in the "Central Dan Register" of the IOGKF.

Place your **PHOTO** in this box.

PRINT CLEARLY OR TYPE

GRADING DATE / /
 dd / mm / yyyy

Note: You cannot be graded without a photo.

YOUR NAME IN KATAKANA OR IN JAPANESE SYLLABLES

PERSONAL INFORMATION

HOME

NAME _____ **TELEPHONE** _____
 First Name Family Name Country Code City Code Number

E-MAIL _____ **MALE / FEMALE (Please circle)**

HOME ADDRESS _____

AGE _____ **DATE OF BIRTH** / / **NATIONALITY** _____
 dd / mm / yyyy

TRAINING RECORD

No. Of years in Goju-Ryu	Total years in Karate	# Training hours per week	Present rank

DOJO NAME _____ **SENSEI'S NAME** _____

DOJO ADDRESS _____ **DOJO COUNTRY** _____

IOGKF GRADING HISTORY – (please fill in using this format **dd/mm/yyyy**)

Shodan	Nidan	Sandan	Yondan	Godan	Rokudan

IOGKF NATIONAL/INTERNATIONAL GASSHUKU RECORD

Record only those **since your last** grading

Date (dd/mm/yyyy)					
Location					

To be completed by your Sensei:

Recommended rank _____

Has candidate previously failed this grading? Yes / No
 (Circle One)

Written Exam score: _____ % (sandan and below)
Yondan and up, please submit the written essay with this form.
(Essay must be in English for international gradings)

Signature of candidate's Chief Instructor:

To be Filled Out by Examiner

Grading Fee Paid: \$ _____

Registration Fee Paid: \$ _____

Date of Grading / /
 dd / mm / yyyy

Results: Pass / Fail (Circle One)

Rank Awarded: _____

Examiner's Signature: _____