

THE UNITED STATES AIKIDO FEDERATION

142 West 18th Street, New York, N.Y. 10011, (212) 242-6246



APPLICATION FOR KYU AND DAN PROMOTION

PLEASE PRINT

DATE OF TEST _____
Month/Day/Year

NAME _____ USAF Membership No. _____
Last, First Initial (middle)

ADDRESS _____
Number Street City State Zip

DATE OF BIRTH _____ PLACE OF BIRTH _____ SEX : M _____ F _____
Month/Day/Year

OCCUPATION _____ CITIZEN OF _____

I began practicing Aikido _____ and presently hold the grade of _____
Month/Year

Awarded to me _____ by _____
Month/Year Examiner's Name

At an examination held at _____ I have practiced _____ since that grading
Location Days/Hours

I hereby apply for the grading of: _____ KYU _____ DAN

Instructor _____ Dojo _____

I hereby commend this application to the consideration of the Examination committee.

Instructor's Signature Applicant's Signature

TO BE COMPLETED BY APPLICANTS FOR NIDAN & ABOVE

Yudansha Card No. _____ Aikikai Foundation Membership No. _____
(Date)

LIST PLACES AND DATES OF SEMINARS SINCE LAST EXAM

Seminar _____ Date _____

_____	_____
_____	_____
_____	_____
_____	_____

FOR USAF OFFICIAL USE

Promotion by : Examination Recommendation Disposition: Pass Fail

By _____ On _____ At _____
Examiner's Signature Mo/Day/Yr Location of Examination

Approved by _____ Date _____
USAF Examination Committee