

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.

Note: You cannot be graded without a photo.

PRINT CLEARLY OR TYPE

GRADING DATE / /
 dd / mm / yyyy

YOUR NAME IN KATAKANA OR IN JAPANESE SYLLABLES

PERSONAL INFORMATION

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

E-MAIL _____ MALE / FEMALE (Please circle)

HOME ADDRESS _____

[illegible]

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-*since your last grading-only 5*

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: \$ _____

Date of Grading / /
dd /mm/yyyy

Results: Pass / Fail *(Circle One)*

Rank Awarded: _____

Examiner's Signature:_____